

# Key Largo Chamber of Commerce

## Membership Application



Company: \_\_\_\_\_

Company representative: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Business location (if different from mailing): \_\_\_\_\_

City, state and zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail address (we will not share it with anyone): \_\_\_\_\_

Website: www. \_\_\_\_\_

Business Classification: (first choice): \_\_\_\_\_

(second choice): \_\_\_\_\_

Referred by: \_\_\_\_\_

### **Membership Dues**

1 - 10 Employees \$265

11- 25 Employees \$375

26 + Employees \$485

Nonprofit rate \$110

Retired Citizen \$ 95

*(First-year dues include a one-time processing fee.)*

*For additional information, contact the chamber at:*

106000 Overseas Highway

Key Largo, FL 33037

Telephone: (305) 451-1414

Toll Free: (800) 822-1088

Fax: (305) 451-4726

Email: [president@keylargo-chamber.org](mailto:president@keylargo-chamber.org)

Website: [Keylargo-chamber.org](http://Keylargo-chamber.org)

Number of employees: \_\_\_\_\_ Membership Dues Paid: \$ \_\_\_\_\_

Make checks payable to the Key Largo Chamber of Commerce.

For credit card payments, fill in the following information:

Credit card type:  American Express  MasterCard  Visa

Card number: \_\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_ Security code: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please include a copy of your Monroe County occupational license with this application.**

Note: Your membership dues support the activities of the chamber and are non-refundable.

The chamber serves as an advocacy organization for business purposes. It is not a charitable organization.

\_\_\_\_\_  
Signature

Mission statement of the Key Largo Chamber of Commerce

**Creating a vibrant business and community environment**