



THE  
AVENTURA -  
SUNNY ISLES BEACH  
CHAMBER OF COMMERCE

## MEMBERSHIP APPLICATION

Please fill out and return with your check or Credit Card information to:

20533 Biscayne Boulevard, Suite 536 Aventura, Florida 33180

***Mission Statement:*** The mission of the Aventura-Sunny Isles Beach Chamber is to foster the enhancement of our community, promote progressive government and business, and provide reasonable business development.

Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_

Company address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Business Category (description) \_\_\_\_\_ Number of employees \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail address \_\_\_\_\_ Web Site \_\_\_\_\_

### *Yearly Membership Investment Schedule*

<b>Category</b>	<b>Amount</b>	<b>Category</b>	<b>Amount</b>
___ Business 1- 6 Employees	\$295.00	___ Business 11- 19 Employees	\$595.00
___ Business 7-10 Employees	\$395.00	___ Business 20 + Employees	\$795.00
___ Pillar	\$1,000.00	___ Trustee	\$1,500.00

A \$25.00 processing fee will be added to all membership levels for NEW members only

CHECK FOR: \_\_\_ 10% discount with two (2) year membership \_\_\_ 20% discount with three (3) year membership

Member-to-Member Discount Benefit? Level: \$ \_\_\_\_\_ or % \_\_\_\_\_

Method of payment:  Check  Master Card  Visa  Amex  Discover

Account # : \_\_\_\_\_ Expires: \_\_\_/\_\_\_/\_\_\_ Sec. code \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

**I agree that as a condition of membership in the chamber, I will conduct my business in a manner that is ethical, fair, and honest in all dealings with my customers, vendors, associates, employees, and fellow businesses.**

I hereby make application for membership in the Aventura-Sunny Isles Beach Chamber of Commerce. I will abide by its bylaws, support its objectives and pay the prescribed annual membership investment. I further understand that any membership identification (certificates, plaques, etc.) belong to the chamber and will be used with rules of the Chamber concerning their display and usage.

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

#### **For office use only**

Membership investment \$ \_\_\_\_\_ Check number \_\_\_\_\_ Dues paid through \_\_\_\_\_

Aventura – Sunny Isles Beach Chamber of Commerce

Telephone: 1-877-992-7422 ext#1

[www.ventura.org](http://www.ventura.org) E-mail: [JSR51350@aol.com](mailto:JSR51350@aol.com)