

## Toluca Lake Chamber of Commerce

info@TolucaLakeChamber.com

818-761-6594

## **Membership Application**

Complete this application and mail it with your check or credit card information to: T. L. C. C., P O Box 2312, Toluca Lake, CA 91602

Company			Do not list my name or company	
Mailing Address			in the Chamber directory or publications.	
City, State Zip	· · · · · · · · · · · · · · · · · · ·		I would be interested in serving on a Chamber committee to help out.	
Main Contact	First Name Last Name		Please contact me, I have a few questions.	
Home Phone			Your application for membership servers as authorization for the Toluca Lake Chamber of	
Business Phone			Commerce to communicate with you by phone, fax, email or	
Fax			other electronic means.  If you do not wish to be	
Email			contacted by us, please check this box.	
Company	of your business as you would like it to		mbers directly. Same as above Do not list	
	SS		Email	٠ ا
Business Phor Fax		-	Website URL	
Membership Fe	e	Bus	siness Member	
	☐ Visa ☐ Mastercard ☐ Che	ck enclosed	☐ 1 to 25 employees \$125	.00
Name on card			☐ 26 to 50 employees \$150	.00
Card number			Over 50 employees \$250	.00
Expiration date Signature	/ CVV		Associate Member \$50 An Associate Membershi is an individual listing of an employee of an existir member company.	р
			Residential Member \$40	.00
			Non-Profit Member \$40	.00