



Membership Application

Complete this application and mail it with your check or credit card information to **TLCC, PO Box 2312, Toluca Lake, CA 91610.**

Or GO ONLINE to join the Chamber or update your membership.

Company _____

Mailing Address _____

City, State, Zip _____ / _____ / _____

Main Contact _____
 First Name *Last Name*

Home Phone () _____

Business Phone () _____

Fax () _____

Email _____



Membership Fee

- Visa Mastercard Check enclosed

Company _____

Name on Card _____

Card Number _____

Expiration Date _____ / _____ CVV _____
 Month *Year*

Signature _____

Business Member

- 1 to 25 employees \$125
- 26 to 50 employees \$150
- Over 50 employees \$250
- Associate Member \$50
 An Associate Membership is an individual listing of an employee of an existing member company.

- Residential Member** \$40
- Non-profit Member** \$40

Fill in the location of your business as you would like it to appear in the Members Directory. Same as above. Do not list.

Company _____

Mailing Address _____

City, State, Zip _____ / _____ / _____

Business Phone () _____

Fax () _____

Email _____

Website URL _____

- Do not list my name or company in the Chamber directory or publications.
- I would be interested in serving on a Chamber committee to help out.
- Please contact me. I have a few questions.
 Your application for membership serves as authorization for the Toluca Lake Chamber of Commerce to communicate with you by phone, fax, email or other electronic means.
- If you do not wish to be contacted by us, please check this box.

JOIN or UPDATE Your Membership tolucalakechamber.com