



## Invitation to Invest

Business Name \_\_\_\_\_

Contact \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Fax \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

# of Full Time Employees \_\_\_\_\_ (2 Part time = 1 Full time)

Business Category \_\_\_\_\_ Contact method ( ) Fax ( ) Email

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

Annual Investment Schedule			
<b>Real Estate/Medical/Accountants/Attorneys</b>			\$250
Additional Associate Listings, each			\$75
<b>Financial Institutes/Hospitals/Utilities</b>			\$700
Additional Branch Listing, each			\$35
<b>Builders/Developers/Contractors</b>			\$315
<b>Apartments</b> (includes 200 rooms or units)			\$210
Each additional room or unit			\$1
<b>Churches, Clubs, Organizations, Secondary Schools, and Community Service</b>			\$140
<b>Political Representative</b>			\$180
<b>Independent Sales or Professional Associate</b>			\$250
<b>Individual Member</b> (no business recognition)			\$140
<b>Retired Member</b>			\$50
<b>General Businesses</b>			
Based on number of full time employees			
2 part time = 1 full time			
1—3	\$210	12—20	\$420
4—7	\$245	21—40	\$630
8—11	\$315	41 & over	\$700
Application Fee			\$25
Additional Business Address			\$40
Additional Business Category			\$35

Member Investment \$ \_\_\_\_\_

Application Fee \$ \_\_\_\_\_

Additional Category \$ \_\_\_\_\_

Additional Address/Branch \$ \_\_\_\_\_

**Total Investment** \$ \_\_\_\_\_

( ) My check is enclosed, payable to:  
 Southaven Chamber of Commerce

( ) Please bill my Visa or MC

( ) ACH Debit (Authorization for direct payments)

Acct# \_\_\_\_\_

Exp date \_\_\_\_\_

Signature \_\_\_\_\_

Referred By: \_\_\_\_\_

Your membership/investment may be deductible  
 as an ordinary and necessary business expense.