



**Pooler Chamber of Commerce and Visitors Bureau  
Membership Application 2010**

PLEASE COMPLETE THIS APPLICATION.  
THANK YOU!

Name of Business: \_\_\_\_\_

Type of business: (check all that apply)

Financial:  Retail:  Education:  Medical:  Manufacturing:

Food/Beverage:  Lodging:  Other:  (Explain) \_\_\_\_\_

Pooler business address: \_\_\_\_\_

Pooler mailing address: (if different from above)  
\_\_\_\_\_

Corporate mailing address: (if different from above)  
\_\_\_\_\_

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

Email address for company contact(s) (Please provide email address so that we may notify you of upcoming chamber news and events. We will not share the email address with other organizations.):  
\_\_\_\_\_

Website: \_\_\_\_\_

Business Owner/Chief Executive Officer: \_\_\_\_\_

Date Business Established: \_\_\_\_\_ Date Business Located in Pooler/Coastal Empire area: \_\_\_\_\_

Number of Employees Corporate-Wide: \_\_\_\_\_

Number of Employees in Pooler/local area: (Total, all locations) \_\_\_\_\_

Annual dues: (rates for 12-month period) Plus \$25.00 Administrative Fee

- \$110 for total of 1-10 employees in Pooler/local area
- \$165 for total of 11-20 employees in Pooler/local area
- \$220 for total of 21-plus employees in Pooler/local area

Would you be willing to (check all that apply) host \_\_\_ or help sponsor \_\_\_ a business networking event or workshop?

Would you be willing to serve one of the following chamber committees (check all that apply)

Tourism Advisory Council \_\_\_ Nominating Committee \_\_\_ Ambassadors Council \_\_\_

Business and Economic Development Council \_\_\_ Budget and Finance Committee \_\_\_

Please fax to Pooler Crossroads Chamber: (912)748-6577 or email to [poolercrossroads@att.net](mailto:poolercrossroads@att.net)

POOLER CHAMBER OF COMMERCE AND VISITORS BUREAU  
WWW.POOLERCROSSROADS.COM · P.O. Box 708 · POOLER, GA 31322  
PHONE (912) 748-0110 · FAX (912)748-6577