



# Greater Caribbean American Chamber of Commerce



Company Name: \_\_\_\_\_

Owner/Primary Contact: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Cell No.: \_\_\_\_\_ Website: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_

Title: \_\_\_\_\_ Cell No.: \_\_\_\_\_

**BUSINESS SECTOR:** (Check all that apply)

- Retail  Wholesale  Manufacturer's Rep.  Distributor  Manufacturer  Business Services
- Construction
- Professional Services  Other  \_\_\_\_\_

Referred by GCACC Member: .....

**COMMITTEES:** (Check interest)

- Economic Development  Membership Development  Job Fair  UNIFEST  Public Relations
- Golf Tournament  Government Relations

**ANNUAL MEMBERSHIP** (Includes Administrative Fee of \$35.00)

- |   |             |   |             |
|---|-------------|---|-------------|
| <input type="checkbox"/> 1- 5 Employees   | \$ 100.00   | <input type="checkbox"/> Municipalities               | \$ 1,035.00 |
| <input type="checkbox"/> 6-10 Employees   | \$ 250.00   | <input type="checkbox"/> Government Agencies          | \$ 700.00   |
| <input type="checkbox"/> 11- 25 Employees | \$ 400.00   | <input type="checkbox"/> Colleges/Universities        | \$ 385.00   |
| <input type="checkbox"/> 26-40 Employees  | \$ 500.00   | <input type="checkbox"/> Not-For-Profit Organizations | \$ 185.00   |
| <input type="checkbox"/> 41-100 Employees | \$ 950.00   | <input type="checkbox"/> Individuals                  | \$ 100.00   |
| <input type="checkbox"/> 100+ Employees   | \$ 1,035.00 | <input type="checkbox"/> Student                      | \$ 50.00    |

**Corporate Sponsor:** Please call us at (954) 634-2472

**Check** payable to GCACC  **Please Invoice**  **Credit/Bank Card:**  MasterCard  Visa  American Express  Discover  
Payment is for one full year's membership dues and includes the administrative fee. Your dues are fully refundable if application is denied.

I certify that all information contained in this application is true and accurate. Upon membership approval by the Board of Directors, the undersigned does agree to abide by and subscribe to the GCACC's Bylaws, Policies and the Code of Conduct.



**Signature** \_\_\_\_\_

Name as it appears on Card \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration date: \_\_\_\_\_ Code \_\_\_\_\_

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