

The South Suburban Chamber of Commerce invites you to join us in advancing the success of businesses in the south suburban Milwaukee County, one of the fastest growing areas in the state!

Chamber members work to improve the regional business climate of the community. They address community issues and initiate constructive community action relative to business. Members also participate in a multitude of learning and networking opportunities, which often result in positive business relationships. Members have the opportunity to join a committee.

For more information, please contact the chamber office.

A South Suburban Chamber of Commerce member or staff person would be happy to answer your questions about membership. In the meantime, to learn more, visit our website at www.southsuburbanchamber.com or call Barbara Wesener, Executive Director or Sanet Muller, Executive Assistant at **414-768-5845**.

Fax: 414-768-5848

Email:
info@southsuburbanchamber.com

To submit this form:
Complete it, print it out and either scan and email, fax, or mail it to our office.

South Suburban Chamber
8040 S. 6th St.
Oak Creek, WI 53154

South Suburban Chamber Membership Application

Annual Dues is based on the number of Full-Time Equivalent Employees.

Number of FTE (Full-Time Equivalent) Employees in your company: _____ (write in number)

Number of Employees	Annual Dues
1-5 FTE	\$ 240.00
6-10 FTE	\$ 300.00
11-25 FTE	\$ 385.00
26-50 FTE	\$ 475.00
51 -219 FTE	Base Dues of \$475 + \$3 per FTE \$ _____ (write in) (capped at \$1,132)
220-1,000	Base Dues of \$1,000 + \$1 per FTE \$ _____ (write in) (capped at \$2,000)
Government/Schools/Churches	\$ 200.00

Please circle your category above.

Method of Payment

Check Visa MasterCard American Express

Credit Card Number _____

Expiration Date _____ 3 Digit V Code _____ (4 digits for AMEX)

Please make this person the BILLING Contact, separate from the Primary Contact listed above.

Cardholder Name _____

Address _____

Signature _____

General Information

Company Name: _____

Primary Phone: _____ Fax: _____

Alternate Phone: _____ Email: _____

Toll-Free Phone: _____ Website: _____

Cell Phone: _____

Physical Address: _____

City/State/Zip: _____

Country: _____

Use Physical Address as the Mailing Address

Mailing Address: _____

City/State/Zip: _____

Country: _____

Personal Information

First Name:* _____ Job Title: _____

Middle Name: _____ Primary Contact

Last Name:* _____

Address: _____

Work Phone: _____

City/State/Zip: _____ Home Phone: _____

eMail: _____ Cell Phone: _____

Fax: _____

How did you hear about the Chamber? _____