



Partnership Application

The Space Coast's Leading Chamber for Business Advocacy and Community Development.
Please contact us at 321-724-5400 or Partnership@MelbourneRegionalChamber.com with any questions.

COMPANY INFORMATION (All contact information required. Please list as you would like it to appear to the public.)

_____ Company Name		_____ Year Established	_____ # of Employees - Full Time	_____ # of Employees - Part Time
_____ Mailing / Billing Address <input type="checkbox"/> Make Public?		_____ City	_____ State	_____ Zip
_____ Business Category		_____ Referred By		
<input type="checkbox"/> Woman-Owned	<input type="checkbox"/> Minority-Owned	<input type="checkbox"/> Veteran-Owned	<input type="checkbox"/> Service Disabled Veteran-Owned	<input type="checkbox"/> Nonprofit

POINT OF CONTACT (Who will represent your company and receive information?)

_____ First Name	_____ Middle Initial	_____ Last Name
_____ Title		
_____ Phone # with Extension	_____ Cell #	
_____ E-mail		

If you would like any of your employees to be added to the chamber's e-mail distribution list, please list their e-mails here:

_____ Name / Title	_____ E-mail

Feel free to add additional pieces of paper with additional names

UPON RECEIPT OF PAYMENT, WE WILL ANNOUNCE YOUR NEW PARTNERSHIP ON SOCIAL MEDIA AND IN OUR NEWSLETTER. Please provide the following as you would like them to appear:

Brief description of your business (2-3 sentences):

Quote regarding why you are joining the Melbourne Regional Chamber:

ONLINE INFORMATION (If you or your company is online, please link up with us.)

Website?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Address:	_____
Facebook?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Page:	_____
LinkedIn?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Page:	_____
Twitter?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Account:	_____
Instagram?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Account:	_____

JOIN A COUNCIL

Councils are sub-groups of partners of the chamber, formed within the chamber, that focus on a particular niche or business area. When these niche groups grow in the number of partners, the chamber creates a council (by directive of the Board of Directors). As the council shrinks in partners, as they do from time to time, the board disbands the council. Partnership is included with chamber partnership.



- Business Advocacy Committee (BAC):** Included with chamber dues. The Business Advocacy Committee lobbies for key issues that impact Melbourne and Brevard County's business community. Guided by our overarching mission statement as the Melbourne Regional Chamber, the Business Advocacy Committee's focus is protecting the business-friendly climate of Melbourne, as we work in conjunction with all the chambers across Brevard County.
- Nonprofit Council (NPC):** Included with chamber dues. Dedicated to providing nonprofit organizations with the tools they need to succeed through leadership training, information sharing and review of best practices.
- Small Business Council (SBC):** Included with chamber dues. Designed for businesses and organizations fewer than 50 employees. Council partners network, share information, and gather the resources they need to improve, grow and flourish.
- Space Coast Young Professionals (SCYP):** Included with chamber dues. Focused on career growth, professional development, and issues of interest to partners under the age of forty, this council welcomes members of all ages.
- Viera Regional Business Alliance (VRBA):** Included with chamber dues. Dedicated to the growth and concerns of the Viera/Suntree/Rockledge area, this council is the place to be if you are doing business, or want to be doing business, in those areas.
- Women of Excellence Council (WE):** Included with chamber dues. Gatherings to empower diverse working women to achieve their highest potential through collaborative initiatives focusing on networking and professional development.

DUES AND OTHER INVESTMENTS

One Time Application Fee \$ 50.00

Annual Partnership Dues for a period of 12+ months (non-refundable)

Partnership Type - Partner:+\$ _____

# of Employees	Annual
0-5	\$475
6-15	\$630
16-30	\$690
31-50	\$975
51+	\$1,645

Partnership Type - Nonprofit:+\$ _____

Note: Dues are reduced from Partnership Type: Member dues, based on employee count

# of Employees	Annual
0-1	\$270
2-50	\$410
51+	\$675

Investor Partner Price of Level Selected (Price Range: \$1,500 - \$10,000 Once Per Term)+\$ _____

Contact Anne Conroy-Baiter at: Anne@MelbourneRegionalChamber.com

Additional Location \$175 Annually+\$ _____

Total Amount Due=\$ _____

METHOD OF PAYMENT

Check Enclosed (Payable to Melbourne Regional Chamber, 1135 W. NASA Blvd., Suite 103, Melbourne, FL 32901)

Credit Card (See credit card authorization form on page 4. Partnership@MelbourneRegionalChamber.com)

Questions? Call 321-724-5400 or email: Partnership@MelbourneRegionalChamber.com

Dues payments to the Melbourne Regional Chamber are not deductible as a charitable contribution for federal income tax purposes. Dues payments may be deducted as an ordinary and necessary business expense. You are advised to consult a tax professional regarding the deduction of dues payments to the chamber. Dues and other investments paid to the chamber are non-refundable.

PARTNERSHIP AGREEMENT FOR ALL PARTNERS

Partnership Agreement: I agree to abide by the bylaws and policies of the Melbourne Regional Chamber. I acknowledge that my company may use the chamber logo on all advertising, marketing, promotional, and public relations materials, which includes but is not limited to, the display of the chamber partner window cling, as long as my company remains a partner in good standing. Remaining a partner in good standing includes paying all chamber bills, including partnership dues bills, within 30 days or less.

If my company's partnership in the Melbourne Regional Chamber becomes inactive or terminated for any reason, I agree to immediately discontinue use of any and all chamber logos and insignias. I further agree that I will immediately remove from public display and viewing my chamber partner window cling.

I understand acceptance into the chamber **DOES NOT GUARANTEE** acceptance into any endorsed program and/or affinity program sponsored by the Melbourne Regional Chamber.

I agree that the Chamber Board of Directors has full and final authority as to whether my partnership will be accepted.

Signature of Company Primary Contact (required for partnership)

Date



FOR OFFICE USE ONLY

Rec'd by _____ Rec'd date _____
 Payment type check check # _____
 credit card cash/money order
 Renewal date _____
 New Partner Number _____

Credit Card Authorization Form

CREDIT CARD INFORMATION

Visa
 Master Card
 American Express
 Discover Card

Cardholder's Name (as it appears on card) _____

Billing Zip Code _____

Credit Card Number _____

Expiration Date _____

Security Code _____

Cardholder Phone Number _____

PAYMENT FOR

New Partner / Investor Application
 Map
 Relocation Packet
 Notary
 Certificate of Origin

Event _____
 Other _____

Amount \$ _____ Signature _____ Date _____

By checking the box, I authorize Melbourne Regional Chamber to charge the account indicated above for the total amount shown above. The next payment of all annual amounts will be charged as of today's date and will continue annually unless I notify Melbourne Regional Chamber of its cancellation.