



High Growth Business Club Membership Application

Date _____

Company Name _____

Contact _____

Mailing Address _____

City _____

State _____

Zip Code _____

Physical Address _____

City _____

State _____

Zip Code _____

Telephone Number _____

(800) _____

Fax _____

E-Mail _____

Corporate E-Mail _____

Type of Business _____

Website _____

You have my permission to fax HGBC information to me: _____ YES _____ NO _____ Initials

METHOD OF PAYMENT: _____ Check _____ Visa/MC/AmEx/Discover: _____ Exp Date: _____

Make checks payable to Pensacola Area Chamber of Commerce

Annual Membership Fee

\$ 90

Names of Management Team (each additional membership is \$75)

Total No. of Memberships _____

Total Investment \$ _____

When you make the commitment to join the High Growth Business Club, your investment ensures we can meet your needs. Please take a moment to answer a few questions.

What will your level of involvement be in the HGBC?

_____ Attend Monthly Meetings

_____ Serve As A Mentor

_____ Speaker

_____ Sponsor/Host a Meeting

_____ Networking

_____ Serve in Other Capacity (business liaison, etc.)

What prompted your decision to join the HGBC? _____

Authorized Signature:

Print Name/Title:

Return to: Pensacola Area Chamber of Commerce,
Attn: Economic Development Dept., 117 West Garden Street, Pensacola, FL 32502