

MEMBERSHIP APPLICATION

CONTACT INFORMATION

Firm/Business Name: _____

Street Address: _____
Street/PO Box City State Zip + 4

Mailing Address: _____
(If different from street) Street/PO Box City State Zip + 4

Phone: () _____ Toll Free: () _____ Fax: () _____

General Email*: _____ Website: _____
(i.e. info@company.com)

Social Media Pages: _____
Twitter Facebook

Primary Contact: _____
Name Title Preferred First Name

Individual Email*: _____ Individual Phone: () _____

BUSINESS INFORMATION

Business location: North South East West Downtown Other

Are you a member of:

- | | |
|--|--|
| <input type="checkbox"/> Charlotte Chamber of Commerce | <input type="checkbox"/> Delta Area Business Association |
| <input type="checkbox"/> DeWitt Downtown Development Authority | <input type="checkbox"/> East Lansing Downtown Development Board |
| <input type="checkbox"/> Grand Ledge Chamber of Commerce | <input type="checkbox"/> Holt Business Association |
| <input type="checkbox"/> Mason Chamber of Commerce | <input type="checkbox"/> Meridian Area Business Association |
| <input type="checkbox"/> Old Town Commercial Association | <input type="checkbox"/> Downtown Lansing, Inc. |
| <input type="checkbox"/> South Lansing Business Association | <input type="checkbox"/> Williamston Chamber of Commerce |
| <input type="checkbox"/> Other: _____ | |

Is business locally owned? Yes No

Hours of Operation: _____

**By filling in your email address, you agree to receive all future promotional email from the Greater Lansing Convention & Visitors Bureau. You can unsubscribe at any time if you no longer find it useful. All email addresses collected are used ONLY for the Greater Lansing Convention & Visitors Bureau. We do not sell, lease or market your email information to anyone for any purpose. We reserve the right to provide your mailing address to fellow members in the form of labels or data file.*

BUSINESS DESCRIPTION

Describe your business (*this description will be placed on our website*):

KEYWORDS

Keywords are used to search our database/website to locate specific member types or categories. Please list some keywords that you would like our web visitors to use when accessing your listing. Include common typos, e.g., accommodations (correct) and accomodations (incorrect):

WEBSITE LISTING GRAPHICS AND PHOTOS

The GLCVB encourages you to add a logo or pictures to your listing on our website. We are able to offer you a thumbnail picture on your listing and include additional pictures with your member details. Email pictures to membership@lansing.org.

TYPE OF MEMBERSHIP

- | | |
|--|---|
| <input type="checkbox"/> General (<i>up to 49 employees</i>) | <input type="checkbox"/> Associate (<i>multiple entities managed by the same owner</i>) |
| <input type="checkbox"/> Corporate (<i>50+ employees</i>) | <input type="checkbox"/> Shopping Mall/Retail Center Tenant (<i>less than 10 employees</i>) |
| <input type="checkbox"/> Corporate (<i>200+ employees</i>) | <input type="checkbox"/> Merchant Association Member (<i>less than 10 employees</i>) |
| <input type="checkbox"/> Nonprofit (<i>less than 25 employees</i>) | |

MEMBERSHIP INVESTMENT (*see rate schedule*)

Your membership investment is prorated based on the month joined. Annual membership investments are due July 1 of each year.

Annual Membership Investment \$ _____

TOTAL NOW DUE (*Prorated—see Member Rate Card*) \$ _____

*I/We understand that the partnership is ongoing and will remain as such until written notice of cancellation is received by the Greater Lansing Convention and Visitors Bureau. **NOTE: Delinquency of payment after 90 days constitutes automatic cancellation of membership.***

Method of payment: Cash Check # _____ MC Visa Discover AmEx

Credit Card#: _____ Expiration: _____ Security Code: _____

Signature and Title: _____ Date: _____

OFFICE USE ONLY

Application received by: _____ NAICS Code (for website): _____ Date: _____

Business Code: _____ Description: _____