



Membership Application for the GreenRidge Chamber of Commerce

Company or Individual Name: _____

Office Phone: _____ Website: _____

Company Email Address: _____

Facebook: _____ Instagram: _____

LinkedIn: _____ Other: _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Number of Employees: _____ Business Start Date: _____

Industry: _____ Products/Services Provided: _____

Primary Representative: _____ Title: _____

Phone Number: _____ Email: _____

Additional Representative (optional): _____ Title: _____

Phone Number: _____ Email: _____

I accept your invitation for membership in the GreenRidge Chamber of Commerce, and I agree to pay my annual dues unless cancelled in writing or conveyed to the board of directors.

Signature: _____ Date: _____

Please see the next page for membership due amounts and instructions for submitting your application.

Membership dues are based on the number of employees within your business.

Number of Employees	Annual Dues Amount
1 to 5	\$120.00
6 to 10	\$180.00
11 or more	\$270.00
Churches & Nonprofits	\$100.00
Individuals	\$100.00
Students & Teachers	FREE

Please submit your application and membership due payment by mail or email. If you wish, membership dues may also be paid online at www.greenridgechamber.org.

Mailing Address: **Attn: Jessica Marshall**

 PO Box 709

 Ridgetop, TN 37152

Email Address: **growinggreenridge@gmail.com**