



# MEMBER APPLICATION

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## MEMBER DUES

(based on employees)

Check One

1: \$125

2-10: \$200

11-20: \$300

21-30: \$400

over 31: \$500

Non-profit: \$100

Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Referral Source: \_\_\_\_\_

## POINT OF CONTACT INFORMATION

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Website: \_\_\_\_\_

*If you do not have a website, please give a brief description of your business and/or its services. You may also complete this section if you wish to add such a description to your online profile.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## AREAS OF INTEREST

I'm interested in some information about serving on committee(s)

- Events/Fund Raising   
  Government Relations/Political Action   
  Marketing  
 Membership   
  Home-based Business Initiatives   
  Finance

I'm interested in some information on hosting a Business After Hours (BAH)

## BILLING ADDRESS Same as Above

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## PAYMENT

Check Enclosed # \_\_\_\_\_  Credit Card Circle One:    MasterCard    Visa

Credit Card No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CC Security No: \_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

*Thank You for  
Joining YCCC!*