



Indo American Chamber of Commerce-USA

A Non-Profit, Tax-exempt Organization

Tax ID#38-3687119

19215 West Eight Mile Road, Detroit MI 48219

Tel: 866-740-0141 Fax: 866-740-0146

Email: info@iaccusa.org Website: www.iaccusa.org

MEMBERSHIP APPLICATION

Corporate / Donor Member Information

Company Name: _____ Primary Business: _____

Last Name: _____ First Name: _____ Date: _____

Occupation / Title: _____ In Business Since: _____

Address: _____ City _____ State _____ Zip _____

Telephone: _____ Fax: _____ Email: _____ Website: _____

Type of Company: Sole Proprietor Partnership Corporation LLC LLP Other _____

Company Size (Number of Employees): Less than 10 11 to 100 101 to 250 251 to 500 More than 500

Contact Person: _____ Alternative Representative: _____

Position / Title: _____ Position / Title: _____

Member Profile Information (Optional)

Citizen of: _____ Place of Origin (Birth): _____

Interests & Objectives: _____

Memberships with Other Chamber of Commerce / Professional Associations: _____

Referred By: _____

Annual Membership Dues:

Donor Membership: Silver (\$ 1,500) _____ Gold (\$ 2,500) _____ Platinum (\$ 5,000) _____

Corporate Membership:

- 1. \$ 150 (less than 10 employees)
- 2. \$ 250 (11 to 100 employees)
- 3. \$ 500 (101 to 250 employees)
- 4. \$ 1,000 (251 to 500 employees)
- 5. \$ 2,500 (more than 500 employees)

Please make all checks payable to "IACC-USA"

I have completed this application for membership/donor to the Indo American Chamber of Commerce-USA (IACC) and hereby certify that the information contained herein is true and accurate to the best of my knowledge.

Mode of Payment: Check # _____ Card Type# _____ Credit Card # _____

Name on Credit Card: _____ Exp. Date: _____ Billing Address: _____

Signature: _____

Date: _____