



INDO AMERICAN CHAMBER OF COMMERCE - USA

Executive Office: 42010 Baintree Circle, Northville, MI 48168-2363 PH: 866-740-0141; FAX: 866-740-0146

Detroit Office: 7310 Woodward Avenue, Fifth Floor, Detroit, MI 48202

A Non Profit Tax Emempt Organization. Tax ID # 38-3687119

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

MEMBERSHIP APPLICATION

Corporate / Donor Member Information

Company/Employer Name: _____ Primary Business: _____

Last Name: _____ First Name: _____ Date: _____

Title: _____ In Business Since: _____; Website: _____

Address: _____

City _____ State _____ Zip _____

Telephone: _____ Fax: _____ Email: _____

Type of Company: Sole Proprietor Partnership Corporation LLC LLP Other

Company Size (Number of Employees):

Fewer than 6 6 to 10 11 to 100 101 to 250 251 to 500 More than 500

Contact Person: _____ Alternate Representative: _____

Member Profile Information (Optional)

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

Interests & Objectives: _____

Affiliation with other Chamber(s) of Commerce: _____

Referred by: _____

Annual Membership Dues

Donor Membership:

Silver (\$ 1,500) _____

Gold (\$ 2,500) _____ Platinum (\$ 5,000) _____

Corporate Membership Dues:

A) \$ 100 (if fewer than 6 employees);

C) \$ 250 (11 to 100 employees);

E) \$ 1,000 (251 to 500 employees);

B) \$ 150 (6 to 10 employees);

D) \$ 500 (101 to 250 employees);

F) \$ 2,500 (more than 500 employees)

Individual Membership Dues:

\$ 60

Student Membership Dues:

\$30

Please make all checks payable to "IACC-USA". Please mail the completed form along with a check for your membership dues to: Radhika Venkateswaran, Comerica Bank, 29201 Telegraph Road, Suite 611, Southfield, MI 48034

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

Signature: _____ Date: _____

Amount Paid: _____ Check # _____