

Greater Riverside Hispanic Chamber of Commerce

“Fostering the economic, educational and political development of the Latino Community”

Membership Application and Profile

(To apply online, please go to www.grhcc.org)

(Please Print)

Date of Application _____

CONTACT PERSON (The primary representative who will be the liaison between GRHCC and your company.)

First Name _____ Last Name _____ Title _____

Phone Number _____ Ext. _____ Fax Number _____

E-mail Address _____

Select (choose all that apply): Hispanic/Latino origin Not of Hispanic/Latino origin Male Female

Select benefits you are most interested in receiving as a member of GRHCC (choose all that apply):

Networking Events Business Education Advocacy Procurement Access to Capital Exhibitions

Access to Hispanic Business Contacts Other (specify) _____

BUSINESS INFORMATION

Name of Business _____

Owner Name(s) _____

Street Address _____ City, State, Zip _____

Mailing Address _____ City, State, Zip _____

Website _____

Legal Entity of Business Sole Proprietorship Partnership Corporation S-Corporation LLC
 Non-profit, 501(c)(3) Other (specify) _____

Select if business is: 51% Hispanic-owned 51% Minority-owned (specify) _____
 51% Women-owned Home-based Internet-based (Business conducted online)

Number of Employees _____ Month/Year Started Business _____ NAICS Code _____

Nature of Business (Specify items sold or services provide) _____

Description of Business (Brief promotional statement or company motto describing your business in 7-10 words)

ANNUAL INVESTMENT DUES (Please mark your appropriate category)

Business & Corporate Membership

___ \$100 (1-10 employees) ___ \$300 (51-100 employees)

___ \$200 (11-50 employees) ___ \$400 (100+ employees)

Non-Business Membership

___ \$125 (Non-profit, school or government department)

___ \$ 65 (Individual – no business affiliation)

PAYMENT METHOD (Your membership investment is tax deductible as a legitimate business expense. This is not a charitable contribution)

Investment Dues: \$ _____ Check enclosed (Payable to GRHCC) Cash Visa Master Card

Card Number _____ - _____ - _____ Exp. Date ____ - ____ Code _____

Name on Card _____ Signature _____

Be part of the Hispanic business community's best resource!

Your membership investment in the Greater Riverside Hispanic Chamber of Commerce is payable in advance.

Please send your payment with the completed form membership application & profile to

GRHCC, P.O. Box 5872, Riverside, CA 92517

Or, fax to (951) 848-9244 with your credit card information.

Additional information or questions, please call GRHCC at (951) 682-7422.