

Indo-American Chamber of Commerce of Greater Houston

A Non-Profit Organization
1535 West Loop South, Suite 200, Houston, TX 7
Phone # 713-624-7131 Fax # 713-624-7132
E-mail: info@iaccgh.com



Membership Application

Annual Fee, Terms & Payment for Membership

Donors: Silver (\$1000) _____ Gold (\$ 2500) _____ Platinum (\$ 5000) _____

Memberships: Corporate (\$ 1,000 for Companies with less than 500 employees) _____

Corporate (\$ 2,500 for Companies with more than 500 employees) _____

Individual (\$250) _____

Member Information

Last Name: _____ First Name: _____ Date: _____

Company Name: _____ Occupation / Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email: _____

Corporate / Donor Membership Information

Date: _____ Number of Employees: _____ In Business Since: _____

Company Name: _____ Primary Business: _____

Type of Company: Sole Proprietorship Partnership Corporation LLC LLP

Office Representative: _____ Alternate Rep.: _____

Position / Title: _____ Position / Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-mail: _____

Web Site: _____

Optional Member Profile Information

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

Your interests & Objectives: _____

Other Business Affiliations: _____

Memberships of Other Chamber of Commerce / Professional Associations: _____

Referred By: 1. _____ 2. _____

Please select the form of payment for the total amount due of _____.

Check # _____ Check by mail # _____ Cash _____

Please make all checks payable to "IACCGH"

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

Signature: _____

Date: _____