



Greater Port Arthur Chamber of Commerce

501 Procter Street, Suite 300, Port Arthur, TX 77640

Phone: (409) 963-1107

tclayton@portarthurtexas.com

INVESTMENT AGREEMENT

Dated this ___ day of ___ Year ___ the undersigned makes for membership in The Greater Port Arthur of Commerce and for the value received agrees to the sum of \$ ___\$500.00___ annually.

It is understood this membership shall be for a minimum period of one year from this date and shall continue on the above basis until canceled by notice in writing to the Board of Directors.

Name of Business:

Number of Employees

Physical Address:

Mailing/Billing Address:

Phone: ()

Phone 2: ()

Business Email:

Website:

Facebook:

Twitter:

LinkedIn:

YouTube:

Business Classification

- Please refer to our website: www.portarthurtexas.com. Click on "Membership" on the left menu. Then click the "Choose a Category" menu and browse through our selection to select the category that best fits the description of your business. Company Logo: Please Email company logo to tclayton@portarthurtexas.com

Brief description of business:

- One voting representative per business, unless otherwise specified by The Greater Port Arthur Chamber of Commerce.

Primary/Voting Representative:

Email:

Phone: ()

Cell Phone: ()

Billing Representative:

Email:

Phone: ()

Cell Phone: ()

Additional Representative:

Email:

Phone: ()

Cell Phone: ()

Print

Signed:

Date:

Once the agreement is completed, please sign and return via email at tclayton@portarthurtexas.com. For prices, you may call the Chamber office at (409) 963-1107.

Please note all Investment Agreements are brought to the Board at the monthly meeting. Dues are required prior to Board Approval.

checkbox CHECK: NO. POSTED:

checkbox VISA

checkbox MASTERCARD

checkbox AMERICAN EXPRESS

checkbox DISCOVER

Card Number:

Exp. Date

CVV2 Code

Name as it appears on card:



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CONTACT: Joe Tant/ acct@portarthurtexas.com/ 409-963-1107