



# CCEO PROFESSIONAL MEMBERSHIP

## Application & Renewal Form (Rev. 3/11/09)

CCEO is YOUR professional association. You are the member, not your chamber.

Our Vision is to "Develop our country's most effective chamber leaders", and our Mission is to "Provide resources that maximize chamber leadership to create a strong business climate for our communities" ... to help you, your chamber and community thrive!

If you are your chamber's Exec./CEO, you may choose either of the following membership plans. If you are not your chamber's Exec./CEO, you must choose Plan B and can only become a member if your Exec./CEO is also a member.

**Plan A – Staff Team:** Includes the Chamber Exec./CEO + up to two (2) staff members for one money-saving fee. (After that, the dues for each additional staff member is \$32.00/person.) Since only members are given the Username & Password to the "Members Only" section of our website, this is a great way to give your staff associates an additional tool for increased productivity and their professional growth.

**Plan B – Individual Memberships:** This plan is only for individual memberships. Please note that staff associates (support staff) can only join if their chamber's Exec./CEO is a member of CCEO.

*Note: For either of these plans, in the event a staff member leaves your chamber, the balance of his/her CCEO membership is transferrable to his/her replacement as soon as you provide the CCEO office with the new person's name and contact information. Also, if you move to another chamber, your CCEO membership moves with you.*

**Choose your plan of preference, check off your selections and complete all requested information below.**

Chamber Size (# of Member-Investors)	<input type="checkbox"/> Plan A Staff Team	<input type="checkbox"/> Plan B Individual
Full-Time Exec./CEO		
<input type="checkbox"/> Up to 249	<input type="checkbox"/> \$241.00 (CEO+2)	<input type="checkbox"/> \$179.00
<input type="checkbox"/> 250-499	<input type="checkbox"/> \$283.00 (CEO+2)	<input type="checkbox"/> \$210.00
<input type="checkbox"/> 500-999	<input type="checkbox"/> \$326.00 (CEO+2)	<input type="checkbox"/> \$242.00
<input type="checkbox"/> 1,000-1,999	<input type="checkbox"/> \$383.00 (CEO+2)	<input type="checkbox"/> \$284.00
<input type="checkbox"/> 2,000 or more	<input type="checkbox"/> \$425.00 (CEO+2)	<input type="checkbox"/> \$315.00
<input type="checkbox"/> Part-Time Exec./CEO	<input type="checkbox"/> \$210.00 (CEO+2)	<input type="checkbox"/> \$158.00
<input type="checkbox"/> Out-of-State Exec./CEO	<input type="checkbox"/> \$189.00 (CEO+2)	<input type="checkbox"/> \$142.00
<input type="checkbox"/> Staff Associates (Support Staff)	<input type="checkbox"/> \$32.00 for each addl.	<input type="checkbox"/> \$68.00
<input type="checkbox"/> Chief Volunteer Officer (CVO)	n/a	<input type="checkbox"/> 1 <sup>st</sup> Yr.: \$75.00 <input type="checkbox"/> Renewal: \$158.00
<input type="checkbox"/> Out-of-State or Retired Chamber Professional	n/a	<input type="checkbox"/> \$70.00

<sup>1</sup> Date: _____		<sup>2</sup> Chamber Name: _____ (or former chamber if retired): _____	
<b><sup>3a</sup> Exec. Dir./CEO</b>			
Name: _____ (Nick Name: _____) Title: _____			
E-mail Address: _____ No. of Yrs. At this Chamber: _____; In Chamber Profession: _____			
<b><sup>3b</sup> Associate Staff #1</b>			
Name: _____ (Nick Name: _____) Title: _____			
E-mail Address: _____ No. of Yrs. At this Chamber: _____; In Chamber Profession: _____			
<b><sup>3c</sup> Associate Staff #2</b>			
Name: _____ (Nick Name: _____) Title: _____			
E-mail Address: _____ No. of Yrs. At this Chamber: _____; In Chamber Profession: _____			
<sup>4</sup> Mailing Address (if different)		City	State
			Zip
<sup>5</sup> Street Address (if different)		City	State
			Zip
<sup>6</sup> County: _____		<sup>7</sup> Phone: _____	
		<sup>8</sup> Fax: _____	
<sup>9</sup> Toll-Free Number: _____		<sup>10</sup> Web Site Address: _____	
1- _____ - _____ - _____		www. _____	
<sup>11</sup> Number of Member-Investors: _____		<sup>12</sup> Current Year's Income Budget: _____	
		\$ _____	
		<sup>13</sup> No. of Employed Staff: FT: _____ PT: _____	
		<sup>14</sup> Yr. Your Chamber Was Formed: _____	

Please make checks payable to: "Chamber of Commerce Executives of Ohio"  
and mail to:  
Vicki Lowery, CCEO  
175 E. South Trail  
Tiffin, OH 44883

**<sup>15</sup> Payment Enclosed:**

Dues: \$ \_\_\_\_\_  
Scholarship Fund Contrib.: \$ \_\_\_\_\_  
(Any amount is appreciated.)

Total: \$ \_\_\_\_\_

Questions? Please call (937) 554-9534 or email [vlowery.cceo@ohiochamber.com](mailto:vlowery.cceo@ohiochamber.com)

