



**Hampton Roads Hispanic Chamber of Commerce**  
**Cámara de Comercio Hispana De Hampton Roads**

**To enjoy the Benefits of Membership in the Hampton Roads Hispanic Chamber of Commerce,  
Please fill all the information in order to process your application correctly  
and mail this form with your check to:**

**HRHCC**  
**Attn: Olga Torres, Membership Director**  
**208 East Plume Street, Suite 247 Norfolk, VA 23510**  
**(Make Check Payable To HRHCC)**

**Note: If information does not apply to your situation please enter xxx.**

**Title:**                      **First Name**                                      **Middle Initial**                      **Last Name**

**Corporate Title:**

**Company Name:**

**Adress:**

**E-mail Address:**

**URL:**

**Office Phone:**

**Cell Phone:**

**Other – Specify:**

**Number of Local Employees:**

**Type of Business:**

**Would your company like to provide a benefit to the Chamber members? (i.e. – discounts on products or services):**

**ANNUAL MEMBERSHIP INVESTMENT DUES**

**Business with over 100 Employees - \$500**  
**Business with 25-50 Employees - \$250**  
**Non-Profit with over 50 Employees - \$100**  
**Individual / Government Employee - \$50-**

**Business with 51-100 Employees - \$350**  
**Business with less than 25 Employees - \$150**  
**Non-Profit with 1-50 Employees - \$75**  
**Student / Senior - \$25**

**SPONSORSHIP LEVELS**

**Platium - \$5,000**

**Gold - \$4,000**

**Silver - \$3,000**

**Bronze - \$2,000**

**Corporate Supporter - \$1,000**

**Credit Card Type:**

**Credit Card Number:**

**Expiration: (xx/xx)**

**Validation Code:**

**Check #: \_\_\_\_\_**

**Signature \_\_\_\_\_**

**Date \_\_\_\_\_**

***We thank you for your support. [www.hrhcc.org](http://www.hrhcc.org)***