

## Golden Crescent Urban (GCU)

## **Chambers of Commerce**

Member Name	
First Name	
Last Name	
Address	
Cell Phone	Secondary
Email	
Company / Organiza	ation Info (If Applicable)
Name	
Address	
Cell Phone	Office line
Website	
Email	
Membership Amount Paid	Semiannual: Annual: \$
(ii) Org (iii) Exe	
Are you willing to serve on a GCU Committee? YES NO	
Are you willing to serv	e on Board of Directors? Yes NO

