



# APPLICATION, CORPORATE PROFILE AND INVESTMENT DESIGNATION

Please print/type the requested information and return by e-mail to [bturlington@mcbc.biz](mailto:bturlington@mcbc.biz) or mail to: MCBC, P.O. Box 2746, Monterey, CA 93942 PHONE: (831) 216-3000

Company Name: \_\_\_\_\_ Year Established: \_\_\_\_\_

Single Location or  Headquarters #County Employees: \_\_\_\_\_ #CA Employees: \_\_\_\_\_ #Total Employees: \_\_\_\_\_

Location Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Company Phone: \_\_\_\_\_ Company Fax: \_\_\_\_\_

Company Website: \_\_\_\_\_

Business Classification: \_\_\_\_\_

Main Contact: Name: \_\_\_\_\_ Title: \_\_\_\_\_

*(designated to receive mailings, respond to surveys, serve as MCBC investment contact and be listed in published rosters)*

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: : \_\_\_\_\_

Secondary Contact: Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: : \_\_\_\_\_

Billing Contact: Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: : \_\_\_\_\_

Brief Business Description: \_\_\_\_\_

\_\_\_\_\_

### Annual Investment

Board Member *(Voting)* \$2,000    
  Associate Member *(Non-voting)* \$1,000    
  Partner *(government/non-profit, Non-voting)* \$500

### Payment Method

Check Attached    
  Send Invoice    
  Credit Card: Visa, M/C, Amex, Discover

Card # \_\_\_\_\_ Exp: \_\_\_\_\_ CVC: \_\_\_\_\_ *(3 or 4 digit)*

Name on Card: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

*By joining the Monterey County Business Council, I agree to support and promote the business community by working with government and academia to enhance Monterey County's economy and to promote a high quality of life.*