

# MEMBERSHIP APPLICATION

## Company Information

Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Web: \_\_\_\_\_  
 Company ID: \_\_\_\_\_

## Contact Info

Name: \_\_\_\_\_  
 Position: \_\_\_\_\_  
 Tel: \_\_\_\_\_  
 Email: \_\_\_\_\_

## Other Contacts

Type	Name	Position	Email	Telephone
Secondary	_____	_____	_____	_____
Accounting	_____	_____	_____	_____
Marketing	_____	_____	_____	_____
Additional Representative	_____	_____	_____	_____
Additional Representative	_____	_____	_____	_____
Additional Representative	_____	_____	_____	_____

## Business Activity

Industry: \_\_\_\_\_ Speciality: \_\_\_\_\_

Company based in the US:  
 Yes  No

If not, specify where:

Nº of employees: \_\_\_\_\_

Operations start year: \_\_\_\_\_

Does your company invest in Spain?  
 Yes  No

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## Select Membership – Annual Fee

- Trustee \$15,000
- Platinum \$5,000
- Corporate \$1,500
- General \$500

Select the next box if you are interested in the Chamber as an US agent.

- FDA – FDA registration, resident agent, renewal, consulting services.**

## Brief description of your company

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Would you be interested in offering any service to our members? Please specify

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## Events

What topics would you like to see addressed in our events?

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Would you be interested in organizing an event in/with the Chamber? (seminars, conferences, etc)

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## PAYMENT METHOD

**Check: Only from US**

To the order of: SPAIN-US CHAMBER OF COMMERCE INC.

Send to the following address: 2153 Coral Way, Suite 400 | Miami, FL 33145

**Credit Card**

Visa

Mastercard

AMEX

Card Number: \_\_\_\_\_

Card Holder: \_\_\_\_\_

Expiration Date: MM/DD/YYYY

CW: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Amount: \_\_\_\_\_

**Wire Transfer**

If you select this payment method, please add \$35 to the amount owed for processing fees.

Bank name: City National Bank of Florida

Address: 2720 Coral Way Miami, FL 33145

Holder: Spain-US Chamber of Commerce, INC.

IBAN: 0019679006 SWIFT: CNBFUS3M

ACCOUNT NUMBER: 0019679006

ABA Bank Code/Country: 066004367

Please, send the completed payment form to the following email address: [accounting@spainchamber.org](mailto:accounting@spainchamber.org)

DATE: MM/DD/YYYY

SIGNATURE: \_\_\_\_\_