

2018 MEMBERSHIP FORM

MAIL APPLICATION TO:
5737 SWOPE PARKWAY
KANSAS CITY, MO 64130

EMAIL: INFO@BCCGK.ORG



What type of membership are you interested in?

Full-Time Student _____ Individual _____

NAME: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Main Phone: _____ Cell: _____

Email: _____ Website: _____

Age (optional)? _____ Ethnic Background (optional)? _____

Male: _____ Female: _____

Where are you from? _____

Do you own a business?: _____ Do you work FT/PT?: _____

Name of the Company you Own or Work for?: _____

Type of Business: _____

Highest Level of Education Completed: _____

TELL US ABOUT YOURSELF + WHY YOU ARE INTERESTED IN THE CHAMBER:

Please select the committee(s) in which you would have interest in serving on.

Legislative + Public Policy Business + Economic Development Finance Fundraising
 Membership Development Programs + Activities Marketing/Communication/PR

What are the three biggest challenges in your business or as a professional you are facing today?

1. _____
2. _____
3. _____

METHOD OF PAYMENT:

CHECK-Please make checks payable to the **Black Chamber of Commerce** CHK NO: _____

CREDIT CARD CARD TYPE (i.e. Visa) _____

Card Holder Name/Company Name: _____ Billing Zip: _____

Card No.: _____ Exp. Date: _____

Signature: _____ Date: _____

I hereby certify that the information contained herein is true and accurate to the best of my knowledge.

Signature _____ Date _____

Print Name _____

membership + committees



2018

JR. AMBASSADOR

FULL TIME STUDENT

Any organization of students at a designated high school, college, or university wishing to have direct membership with the Black Chamber.

\$50

PROFESSIONAL/ ENTREPRENEUR

INDIVIDUAL

A professional or entrepreneur who is looking to grow through networking and access to the programs and opportunities available through the chamber.

\$100

SUPPORTER

NON- PROFIT

A non-profit organization having an interest in the objectives who wish to support and expand similar efforts with the Black Chamber.

\$450

SMALL BUSINESS

BUSINESS

A for-profit organization having an interest in the objectives who is looking to grow through networking and access to the programs and opportunities available through the Black chamber.

\$ Vary based on No. Of Employees

MED/LARGE BUSINESS

CORPORATE

A for-profit organization having an interest in the objectives who is looking to grow through networking and access to the programs and opportunities available through the Black chamber.

\$ 7,500

OUR PURPOSE

Our purpose is to ensure that Black-owned businesses always have an opportunity to express their interests and to be heard. It is through the Chamber's persistent voice, our businesses are able to effectively communicate and address the needed changes to rectify continued racial imbalances in the economy and to strengthen the community.

OUR OBJECTIVES

I. To protect and promote current Black owned businesses.

II. To facilitate the establishment of more, larger, and more successful Black owned businesses.

III. To ensure fair unrestricted access to contracts, contacts, and capital to Black owned businesses.

IV. To champion and broker services to major corporations (companies championed bring with them assurance they are qualified financially and managerially to handle major private-sector contracts).

V. To instill within the Black community, the importance of patronizing Black-owned businesses.

VI. To address the needs of Black enterprise in the formulation of long-term, area-wide plans and strategies for business and economic development.

VII. To encourage more of Kansas City's high-achieving Black high school students to pursue business careers.

VIII. Address needs and concerns of Black Professionals living and working in Kansas City

CHAMBER COMMITTEES

Legislative & Public Policy Committee (LPP)

The Committee represents the Black Chamber on local, state and federal issues that impact the members. The Committee researches issues, develops positions it recommends to the Board, and advocates for those positions with Board approval.

Membership Development Committee

The committee develops and implements procedures to increase the number of Members and is responsible for ongoing membership renewal campaigns.

Business and Economic Development Committee (BED)

The Committee develops and implements programs and strategies to enhance the economic opportunities available to the Members.

Fundraising Committee

The Committee coordinates all activities for the purpose of generating funds for the general operating budget of the Black Chamber.

Marketing/Communications/Public Relations Committee (MCP)

The Committee develops and implements procedures to increase the publicity of the Black Chamber and its activities through the media.

Finance Committee

The Committee will guide and make recommendations on matters such as budgets, programs to be funded and contributions to other organizations. It will review audit findings and submit recommendations to the Board. The Committee has responsibility for developing financial policies and assists in the establishment of the budget process.

Program & Activities Committee

The Committee initiates ongoing projects and activities to increase the visibility of the Black Chamber, working closely with the Membership and Fundraising Committees.



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What type of membership are you interested in?

Non-Profit _____ Retail Business/Start Up _____ Small Business _____ Corporate _____

FIRM NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

MAIN PHONE: _____ FAX: _____

COMPANY EMAIL: _____ WEBSITE: _____

FACEBOOK: _____ TWITTER: _____

OTHER SOCIAL MEDIA: _____

TYPE OF BUSINESS: _____

BUSINESS DESCRIPTION OF SERVICES: This will be displayed with your listing with the directory and used in electronic searches (500 character limit)

DATE OF INCORPORATION: _____ **YRS IN BUSINESS:** _____

PERCENTAGE OF OWNERSHIP: MALE _____ FEMALE _____

NO. OF EMPLOYEES FT _____ PT _____ CONTRACT _____ MALE: _____ FEMALE: _____

ENTITY STRUCTURE: _____ (i.e. LLC, Corp., Sole)

ANNUAL GROSS INCOME: ___ Less than \$100,000 ___ \$100,000-500,000 ___ \$500K-\$1,000,000
___ \$1,000,000-\$2M ___ \$2,000,001-\$3M ___ \$3M-\$5M ___ \$10M

CERTIFICATIONS:

___ KCMO MINORITY BUSINESS ENTERPRISE (MBE)

___ KCMO WOMEN OWNED BUSINESS ENTERPRISE (WBE)

___ KCMO SMALL LOCAL BUSINESS ENTERPRISE (SLBE)

___ KCMO SECTION 3

___ MISSOURI REGIONAL CERTIFICATION COMMITTEE (DBE)

___ STATE OF MISSOURI MBE

___ STATE OF MISSOURI WBE

___ FEDERAL -HUBZONE

___ FEDERAL -SBA 8(A) PROGRAM

___ FEDERAL -WOMAN OWNED

___ FEDERAL-VETERAN OWNED

___ OTHER _____

What are the three biggest challenges your business is facing today?

1. _____
2. _____
3. _____

Our Main form of Communication with members is email. To stay connected the Chamber encourages your staff to be activate in a committee and member activities. Please list those contact persons below.

CONTACT REP: _____
TITLE/ROLE: _____
EMAIL: _____ DIRECT NO: _____

CONTACT REP: _____
TITLE/ROLE: _____
EMAIL: _____ DIRECT NO: _____

BCCGKC COMMITTEE(S):

Please select the committee(s) in which you would like to serve on.

Legislative + Public Policy Business + Economic Development Finance Fundraising
 Membership Development Programs + Activities Marketing/Communication/PR

MEMBERSHIP DUES:

Membership dues are based on the calendar year. Invoices will be sent to the Billing/Mailing Address listed.

SUPPORTER

STUDENT (Requires copy of student ID or letter from educational institution on letterhead).....\$50
INDIVIDUAL.....\$100
SMALL RETAIL BUSINESS/ START UP.....\$250
NON-PROFIT (submit copy of tax exempt letter).....\$450

SMALL BUSINESS

10 OR LESS EMPLOYEES.....\$350
11-25 EMPLOYEES.....\$450
26-50 EMPLOYEES.....\$550
51-75 EMPLOYEES.....\$650
76-150 EMPLOYEES.....\$750
150-250 EMPLOYEES.....\$850

MEMBERSHIP INVESTMENT LEVELS

Signature.....\$2,500
Premier.....\$5,500
Executive/Corporate.....\$7,500

REVIEW PROCESS:

While membership is open to the public, the following criteria are prerequisite to membership.

1. Demonstration of potential for business success by being in business for at least two (2) full years prior to applying for membership.
2. Be located in the Kansas City Metropolitan Area
3. Principals must be US citizens
4. Commitment of one or more staff as active members of a committee for the Black Chamber
5. Your business must be a legal entity
6. Having ownership that is of good moral character
7. Agreement to support and uphold the mission of the Black Chamber of Commerce
8. Be recommended by a current member in good standing of the Black Chamber of Commerce

RECOMMENDED/RECRUITED BY: _____

Applications for small businesses and corporate memberships are reviewed by the membership committee and recommended for approval to the board of directors. Once approved, notification and invoice will be sent based on the above levels and rates.

BILLING ADDRESS: _____
BILLING CONTACT: _____
EMAIL: _____

I hereby certify that the information contained herein is true and accurate to the best of my knowledge.

Signature _____ Date _____
Print Name _____