



RECURRING PAYMENT

Want to make paying dues a seamless and easy process? Simply fill out the below form and we will do the processing for you. We just need your authorization.

For questions, please contact our Director of Operations, Katie Taylor:

Email: Katie: ktaylor@baltcountychamber.com Phone: 410-825-6200 Fax: 410-821-9901

Organization Name or Profile # _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

Method of Payment

____ **Credit Card (circle one)** Visa MasterCard Discover American Express

Card # _____ Expiration _____ / _____ / _____ CVV _____

Cardholder's Name _____ Phone _____

Cardholder's Billing Address _____

Cardholder's Billing City/State/Zip _____

Total Dues Investment \$ _____

As an authorized decision maker at my company, I authorize annual scheduled charges to the credit card provided for membership annual dues. I am aware I will be charged the amount indicated per my annual dues contract. A receipt for payment will appear as a charge on your credit card statement and an invoice is available upon request by contacting the chamber. Any changes to processing your payment will require notification to the Chamber within ten days prior to the payment being processed. Membership dues are for one calendar year beginning the month after you join the chamber. If a member leaves the recurring payment plan, the balance of the annual dues will be charged in full.

Printed Name

Signature

Date _____