



Membership Application Form

COMPANY INFORMATION

EDCTC CONTACT INFORMATION

Company Name _____

Company Senior Official _____

(CEO, President if other than EDCTC contact) _____

Type of Business _____

Company Website _____

Contact for

EDCTC _____

Title _____

Email _____

Address _____

City/State/Zip _____

Phone _____

Fax _____

MEMBERSHIP CATEGORIES

Please Select One

Sustaining IGA Partner

- ☐ Council Partner
- ☐ Prominent Small Business Member
- ☐ Small Business Member
- ☐ Entrepreneur Member

DEFINITION OF CATEGORY

One of the Original Founding Partners

Council Partners with over 50 employees (\$2500)

Prominent Small Business with 10 – 49 employees (\$500)

Small Business with less than 10 employees (\$250)

Entrepreneur Member (\$50)

BUSINESS CATEGORY

For our online member directory, please submit a logo to terrecooper@tillamookbaycc.edu Please use .jpg or similar high resolution format.

Annual Membership dues may be paid by check or by requesting an invoice.

- ☐ Check Enclosed
- ☐ Invoice Requested

Signature _____

Date _____

Please return this membership application to our office either by mail, fax, or scan and email to:

Economic Development Council of Tillamook County (EDCTC)

4506 Third Street, Tillamook, OR 97141

Phone: 503-842-2222 x 2500 terrecooper@tillamookbaycc.edu