

Member Benefit Programs

The SOCA Benefit Plan is a self-funded medical benefit plan aimed at sole proprietors and small employers with 2 to 50 employees. Anthem Blue Cross Blue Shield provides claims and stop loss protection. A product of the Anthem Blue Cross Blue Shield network.
www.844medohio.com

Workers Comp Group Rating. Hunter Consulting offers highly competitive premium discounts & excellent claims administrative services.
jprice@hunterconsulting.com

Energy and Renewable Energy Solutions. A unique opportunity to work with the experts at Community Energy Advisors for all their utility cost management & sustainability needs. chamberenergy@ceateam.com

Legal & Identity Protection. Legal Shield/ID Shield provides affordable legal & identity theft protection.
Nickg@dataguardpartners.com

SOCA Pooled Employer Plan (PEP). A new kind of defined contribution plan similar to 401(k) plans offered by individual employers.
Dale.Essenmacher@newportgroup.com

Outsourced HR Consulting. Strategic HR inc work with organizations with a lean HR or no HR department to support some or all of your HR needs. ChamberSales@strategichrinc.com

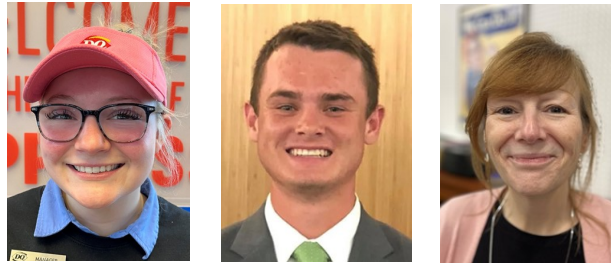
PartnerShip. Access to two shipping savings benefits: exclusive FedEx discounts through the FedEx Advantage program and freight savings with competitive carriers.
sales@PartnerShip.com

Payment Processing through Elavon. Simple, cost effective system. John.Webb@usbank.com

For additional information about these programs and others offered by the Fairborn Area Chamber of Commerce, contact them at:
www.fairbornchamber.com 937-878-3191



Hours: 9 am - 4 pm Tuesday - Friday



Mission Statement

To serve, represent and be the leading advocate for the interests of our members in ways that enhance the business environment, quality of life and wellbeing of our unique community.

Fairborn Area Chamber of Commerce
12 N. Central Ave
Fairborn, OH 45324

P: 937-878-3191

www.fairbornchamber.com

Jan 10, 2024



Membership Application



MY BUSINESS - MY COMMUNITY - MY CHAMBER



ANNUAL MEMBERSHIP LEVELS

1-4 Employees.....	\$185
(Plus \$10 per full time employee)	
5-10 Employees.....	\$250
11-25 Employees.....	\$275
26-50 Employees.....	\$325
51-100 Employees.....	\$400
101-500 Employees.....	\$500
Over 500 Employees.....	\$550
Financial/Developers/Utilities.....	\$550
Non-Profit Groups (Civic & Churches).....	\$150
Hotels/B&B/Lodging/Apartments.....	\$225
(Plus \$1 per room)	
General Contractor/Industrial.....	\$275
(Plus \$5 per full time employee)	
Medical Professional.....	\$275
(Plus \$50 each associate + \$5 each employee)	
*Associate/Individual Member.....	\$100

**Associate/Individual membership is for those individuals who are retired or work for a business that is already a member of the chamber; an elected official or those who hold an appointed office; an individual citizen, a student or active and retired military. Associate/Individual members shall have all the privileges of members, have the right to vote, and shall pay the amount established for this membership level. Associate/Individual members are not eligible to serve on the Board of Directors.*

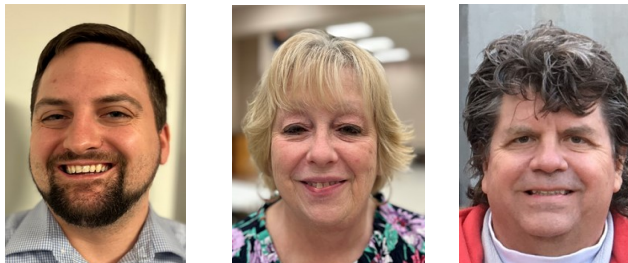


Market your business



Membership has its advantages!

Fairborn is a unique community diverse in population with a City government dedicated to guiding the city into the future. For 99 years the Fairborn Area Chamber of Commerce has consistently strived to be the voice of business in the community, facilitating the growth of existing businesses and fostering new ones. We are committed to providing members with the best discount programs, networking events and ways to promote and market your business. From small business to large, from the City of Fairborn, to Wright State University to Wright-Patterson Air Force Base Fairborn is "A City in Motion!"



Shop and buy Local

MEMBERSHIP APPLICATION

Business Name: _____

Application Date: ____/____/____

Contact Name: _____

Title: _____

Mailing Address: _____

City: _____

State: _____ Zip: _____

Business phone: _____

Cell phone (optional) _____

Fax: _____

Website: _____

E-Mail: _____

Billing address (if different location):

Street: _____

City: _____ State: _____ Zip: _____

Company Information:

Type of Business: _____

Number of full time employees: _____ Part-time: _____

Date company established: ____/____/____

Investment Level: \$ _____



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