



Standard Membership Application Form (Taiwan Chamber of Commerce of Greater Las Vegas)

1: Contact Information

- Full Name: _____
- Company Name: _____
- Job Title/Position: _____
- Phone Number: _____
- Line ID: _____
- Email Address: _____
- Home Address:
 - Street: _____
 - City: _____
 - State/Province: _____
 - Postal Code: _____
 - Country: _____

2: References (Two Required)

- Reference Name: _____
 - TCCGLV Position: _____
 - Phone Number: _____
- Reference Name: _____
 - TCCGLV Position: _____
 - Phone Number: _____

3: Membership Details

Standard Membership Fee (\$200/Year)

4: Declaration

I hereby declare that the information provided above is true and accurate to the best of my knowledge. I agree to abide by the rules and regulations of the membership program.

Authorized Representative Name: _____

Signature: _____

Date: _____

Donation and Payment Information:

Taiwan Chamber of Commerce of Grater Las Vegas (TCCGLV)

Zelle (BOA): tccglv2008@gmail.com