



HUNGARIAN-AMERICAN
CHAMBER OF COMMERCE
OF CALIFORNIA

APPLICATION FOR MEMBERSHIP

Thank you for taking the time to complete our membership form and for becoming a member of our organization. We are looking forward to working with you and helping you grow your business!

You may pay the annual membership fee of \$250 by sending a check to the address below. Please make it payable to the Hungarian-American Chamber of Commerce of California.

Hungarian-American Chamber of Commerce of California
c/o Paul J. Kass, Treasurer
7050 Chimineas Ave.
Reseda, CA 91335

**Application
number**

Company's name				
Address				
Phone number				
Fax				
Website				
Contact person name				
Contact person title				
Contact person phone number and email address				
Number of employees (please circle the applicable number)	1-5	6-20	21-100	100-above
Annual revenue in USD	Below 1 million	1-10 million	above 10 million	
Would you like to receive the periodic HACCCA e-newsletter?	YES	NO		
Do you agree to share your contact details with other members?	YES	NO		
Would you be interested in advertising on the HACCCA website?	YES	NO		
Would you be interested in sponsoring future HACCCA events?	YES	NO		

This is a confirmation that you have submitted an application to become a member of the Hungarian-American Chamber of Commerce of California. If you have any questions or you need assistance in order to take full advantage of your membership benefits, please contact us at info@haccca.org or go to our website at www.haccca.org for continuous updates.

Application number