



South Bay Business Environmental Coalition

Membership Application

Company/Organization Name: _____

Company/Organization Website: _____

Contact Name(s): 1 _____ Email: _____
(up to 4 per membership)

2 _____

3 _____

4 _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Description of Business or Organization:
(i.e., Manufacturing, Government, etc.) _____

Annual Membership Fee Structure

Please indicate your membership category by selecting the appropriate level.

Type of Business/Organization	Annual Dues	Check Membership Level
Individual	\$25.00	<input type="checkbox"/>
Nonprofit Organization	\$50.00	<input type="checkbox"/>
100 or less employees	\$100.00	<input type="checkbox"/>
City/State/Federal Agency	\$ 100.00	<input type="checkbox"/>
101-500 employees	\$ 200.00	<input type="checkbox"/>
501-1,000 employees	\$ 300.00	<input type="checkbox"/>
1,001 or more employees	\$ 500.00	<input type="checkbox"/>

Make check payable to: SBBEC (Tax I.D. # 95-4396281)

Mail to: SBBEC
P.O. Box 572
Manhattan Beach, CA 90267

