



Myrtle Beach Area Chamber of Commerce

Minority-Owned Business Membership Contest

Business Name: _____

Business Address: _____

City: _____

Zip Code: _____

Contact Name: _____

Phone: _____

Email: _____

Minority demographic(s) of owner*: _____

Industry: _____

Date Business Established: _____

Describe Your Business:

*Business must be 51 percent or more owned by a minority. List all demographics that apply. By submitting this form you certify that this business meets all eligibility requirements outlined by the contest rules, terms and conditions.