



Name: _____

Kern County Black Chamber of Commerce Junior Chamber
Membership Application

Please fill out all attached forms completely, as incomplete applications will not be considered.

Attn: Junior Chamber, Kern County Black Chamber of Commerce
2623 F Street Suite F
Bakersfield, CA 93301
(661) 376-2853

As a subset of the Kern County Black Chamber of Commerce, the Jr Black Chamber seeks to motivate, mentor, empower, and education innovative young adults ages 16-25 by providing resources as they move forward onto higher education and/or launch their entrepreneurial ventures while learning what it takes to be successful.

You must meet the following criteria to become a member of the Jr Chamber:

- Interest in entrepreneurship
- If in school, at least a 2.0 GPA



APPLICANT INFORMATION

First Name: _____ Last Name: _____ MI: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Email: _____ Best time to reach you by phone: _____

Age: _____ Month and Year of Birth: ____/____

Highest Level of Education:

- Grade School
- Middle School
- High School
- College

Do you currently or have you ever owned your own business? Yes No (*circle one*)

How did you hear about the Junior Black Chamber? _____

Person to Contact in Case of Emergency:

Name: _____ Relation to You: _____

Emergency Contact Phone:(____) _____ Alternate: (____) _____

Address: _____

If you are a student, please fill out the information below:

School Name: _____ Current Grade Level: _____

Current G.P.A.: _____ Expected Graduation Date: _____

I hereby agree to complete the program in its entirety and take full advantage of this worthwhile opportunity.

Applicant Signature: _____ Date: _____



*Parent/Guardian Signature: _____ Date: _____

*Members ages 14 and 17 must have parent permission to participate in this program.
Parent/guardian signature is also required on the Media Release Form.

MEDIA RELEASE FORM

I, _____ hereby provide permission to the
(Please Print First and Last Name)

Kern County Black Chamber of Commerce Junior Chamber may include certain personal information about myself in connection with support of the Junior Chamber – Kern County Black Chamber of Commerce program including publication in press releases, newsletters, website content, and other promotional materials.

I understand that this media will be accessible to the public and that stories including my participation with KCBCC – The Junior Chamber may appear in written, video, electronic, and other forms.

I understand that information provided by me will be used to promote KCBCC Junior Chamber. I release KCBCC Junior Chamber and its agents and employees from any claims of infringement, invasion of privacy, defamation or misappropriation arising from the use of the information provided by me in the permitted manner.

Member Signature: _____ Date: _____

If under the age of 18, please have parent/legal guardian complete the section below.

Print Name: _____

Signature: _____ Date: _____