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United States of America



Individual



Startup



SME



Corporation

HACCTX Application Form

Join us for free!



Name of Member (Company): _____

Primary Contact: _____

Address: _____

Phone: _____

Email Address: _____

Website: _____

Yes, I would like to become a member of the Hungarian-American Chamber of Commerce, Texas.

Please invoice me for Optional Sponsorship _____

I would like to pay Annual Membership Fee* _____

* **First Year Complimentary!** (Annual Membership Fees: Individual, Startup, Organisation = \$0 / SME = \$200 / Corporate = \$500)

A check is enclosed for _____ (Dues) and Optional Sponsorship _____

Signature: _____ Date: _____

Please return this form to us or send to info@hacctx.org:
Hungarian-American Chamber of Commerce, Texas
5847 San Felipe St, Suite 1700
Houston, TX 77057, United States of America

Thank You!