



German American  
Chambers of Commerce  
Deutsch-Amerikanische  
Handelskammern

# GACC National Partner Program Designed for Nationwide Exposure

## Benefits Overview

Make the most of your membership with our National Partner Program, a unique opportunity for companies seeking exposure and access to the nationwide network of the German American Chambers of Commerce (GACCs). Become a National Partner and receive exclusive benefits offered by each of the GACCs in the US: GACC Midwest, GACC New York, and GACC South.

<b>COMPREHENSIVE BENEFITS</b>	<b>Three Memberships in One</b> Hold the highest membership level and receive the accompanying benefits offered by each GACC: GACC Midwest Patron, GACC New York Patron, and GACC South Executive membership
<b>NATIONWIDE VISIBILITY</b>	<b>Digital &amp; Print Recognition</b> Increase nationwide brand recognition via various marketing channels, including logo placement on designated GACC webpages, a premium profile in the nationally distributed annual Membership Directory, recognition in the quarterly German American Trade Magazine (GAT), and more.
<b>REGIONAL PRESENCE</b>	<b>Promotion of Regional Presence</b> Support your national reach by promoting your regional presence. Receive a premium profile, (including a company description, logo, and listing of additional contacts) in the national, printed Membership Directory and in each of the regional, online Membership Directories.
<b>NETWORKING &amp; ACCESSIBILITY</b>	<b>Access to Nationwide Programming</b> Make meaningful connections nationwide by engaging in over 200+ annual GACC event offerings. National Partners with offices across the US or with staff traveling for business receive discounted admission to all GACC events.
<b>CONVENIENCE &amp; SAVINGS</b>	<b>Annual Savings at a Discount</b> Save a total of \$1,100 on membership dues and receive a single invoice instead of paying each GACC separately at full price. National Partners also receive exclusive discounts on various services provided by the GACCs.

## Your National Partner Program Contacts:

**GACC Midwest**  
Kirsten Gustafson  
[gustafson@gaccmidwest.org](mailto:gustafson@gaccmidwest.org)

**GACC New York**  
Valerie Anderson  
[vanderson@gaccny.com](mailto:vanderson@gaccny.com)

**GACC South**  
Eckhard Wannemacher  
[ewannemacher@gaccsouth.com](mailto:ewannemacher@gaccsouth.com)



# GACC National Partner Program 2020 Membership Application

## National Partner Program

National Partners hold the highest-level membership offered by each GACC, valued at \$5,400 per year, including the GACC Midwest Patron, GACC New York Patron, and GACC South Executive memberships. By completing and submitting the following application, you hereby apply for membership with the GACCs.

Please indicate with which GACC you are already a member, if at all:

- GACC Midwest     GACC New York  
 GACC South     None

## Company Information

Company data provided below to be used for future correspondence and Membership Directory listings, if applicable

Company Name: \_\_\_\_\_  
 Company Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Company Phone: \_\_\_\_\_  
 Website: \_\_\_\_\_  
 Industry: \_\_\_\_\_  
 Business Focus/Type: \_\_\_\_\_  
 # of Employees (US): \_\_\_\_\_

Facility Type (USA):  Headquarters     Manufacturing     Research & Development     Sales & Service

Is your company a subsidiary of a German firm?     Yes     No

If yes, please provide parent company & address \_\_\_\_\_

## Company Logo & Description

Data to be used for Membership Directory listings

Company Logo (300 dpi):     Enclosed     Please contact me for logo

Company Description (20 words max):



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## Regional Company & Contact Information

Data provided below to be used for future correspondence and Membership Directory listings. Please select one person below to be the main contact person for all future National Partner Program correspondence.

### Midwest Region Contact Information

Main contact (choose one)

Company Name:

Company Address:

City, State, Zip:

Contact Name:

Title/Position:

Email Address:

Direct Phone:

### New York Region Contact Information

Main contact (choose one)

Company Name:

Company Address:

City, State, Zip:

Contact Name:

Title/Position:

Email Address:

Direct Phone:

### South Region Contact Information

Main contact (choose one)

Company Name:

Company Address:

City, State, Zip:

Contact Name:

Title/Position:

Email Address:

Direct Phone:



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## Data Privacy Agreement

- I/We grant the German American Chambers of Commerce (GACC Midwest, GACC New York, and GACC South) permission to use the personal contact data, included in this application form, for the administration of its database and membership records, for its own marketing purposes, and to promote German-American business. I understand that without providing permission to utilize my personal data, GACC Midwest, GACC New York, and GACC South will not be able to process my membership. Company and contact details will be used and published in the annual, printed Membership Directory and included in each of the GACCs' online Membership Directory websites; log-in details are required to view/edit member contact information.
- I/We permit the GACCs (GACC Midwest, GACC New York, and GACC South) to include me on their mailing lists in order for me/us to receive future communication, notifications, and correspondence from the GACCs, including but not limited to, event invitations, membership updates, announcements, and newsletters. I/we understand that I/we may revoke my/our consent to have this data stored and to receive notifications from GACC Midwest, GACC New York, and GACC South at any time in the future. To unsubscribe from receiving these notifications, please send an email to [unsubscribe@gaccmidwest.org](mailto:unsubscribe@gaccmidwest.org).

Please refer to our data privacy policy online for further information: [www.gaccmidwest.org/en/privacy-policy](http://www.gaccmidwest.org/en/privacy-policy)

## Membership Payment

Payment is due upon receipt of invoice. Upon submission of payment, the membership will be processed and all corresponding benefits will be activated. Memberships renew annually via invoice unless a notice of cancellation is provided.

Accounts Payable Email Address, if applicable: \_\_\_\_\_

Select your preferred method of payment:  \*Check  Credit Card  Electronic Funds

- I/We elect to apply for the National Partner Program with GACC Midwest, GACC New York, and GACC South

Date

Signature

*Please return the signed application by email to us at [membership@gaccmidwest.org](mailto:membership@gaccmidwest.org) or by fax at (312) 644-0738.*

### Your National Partner Program Contacts:

**GACC Midwest**  
Kirsten Gustafson  
[gustafson@gaccmidwest.org](mailto:gustafson@gaccmidwest.org)

**GACC New York**  
Valerie Anderson  
[vanderson@gaccny.com](mailto:vanderson@gaccny.com)

**GACC South**  
Eckhard Wannemacher  
[ewannemacher@gaccsouth.com](mailto:ewannemacher@gaccsouth.com)

\*Make checks payable to German American Chamber of Commerce of the Midwest, Inc. or GACC Midwest