



Beechworth & District

Chamber of Commerce & Industry Inc.

Represent / Support / Promote / Act

APPLICATION FOR ORDINARY MEMBERSHIP 2010/2011

I/We,
(Please print full name/s of applicant)

.....
(Please print full name of business)

of
(street address)

.....
(Postal address)

Town.....Postcode.....

apply to become a member of the Beechworth Chamber of Commerce and Industry Inc.

My/our Contact Details are: Phone:

Fax:

Mobile:

Email :

Membership Fee: \$165.00 (incl. GST)

In the event of my admission, I/we agree to be bound by the rules of the Association for the time being in force.

Signature of Applicant:

I, a member of the Association, nominate the applicant, who is personally known to me, for membership of the Association.

SignedDate:/...../.....
(Proposer)

I, a member of the Association, second the nomination of the applicant, who is personally known to me, for membership of the Association.

SignedDate:/...../.....
(Seconder)

ABN 61 687 526 166

P O Box 172, Beechworth 3747

Email: contact@beechworthchamber.com.au