

Affiliated with Central West
Business Chamber and



Your Name:

Business Name:

ABN/ACN :

Business Address:

Postal Address:

Brief Description of your Business:.....

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No. of Employees.....

Phone: Fax:

Email: Website:

Your Membership package allows two representatives to attend Chamber Functions such as Breakfast Meetings, After Five Functions, Dinner Meetings, the Annual General Meeting, Seminars, and the distribution of the Chamber Newsletter by email.

Name and Position of Representative 1:

Mob: Email:

Name and Position of Representative 2:

Mob: Email:

I/We hereby apply to join the Orange Business Chamber for the year 2011 and I/We agree to be bound by the Rules of the Chamber for the time being in force.

Applicant 1 Signature:

Applicant 2 Signature:

Please ensure you have completed the Application Form, Tax Invoice and forward together with your payment to:

Orange Business Chamber
PO Box 12
ORANGE NSW 2800

Thank you for your support

Orange Business Chamber

Affiliated with Central West
Business Chamber and 

NSW Business Chamber Membership declaration. (Please tick)

- I/We, being the Applicant/s (or authorised by the Applicant/s) hereby apply for "No Cost" Limited Membership of NSW Business Chamber as part of the Alliance with your Local Business Chamber and agree to be bound by its constitution as amended from time to time. I understand the constitution is on the website www.nswbusinesschamber.com.au/termsandconditions. For full terms and conditions of membership, please visit nswbusinesschamber.com.au.

Signature

Date:

Orange Business Chamber

Affiliated with Central West
Business Chamber and



Membership 2011

Tax Invoice

Thank you for your interest in becoming a Member of the Orange Business Chamber.

Membership for the next twelve (12) months is **\$220.00 including GST**.

Your Membership package includes a Certificate of current Membership, a regular Newsletter distributed by email, and notification of all Functions and Seminars including an invitation for two representatives to attend Dinner Meetings and the Annual General Meeting.

Please ensure you have completed the details below, complete the details on the Application Form and either email this form to orangechamber@bigpond.com or forward with your payment to:

Orange Business Chamber
PO Box 12
ORANGE NSW 2800

PAYMENT

Cheque (payable to Orange Business Chamber)

MasterCard Visa

Amount : **\$220.00 incl GST** Date : _____

Card No: _____

Name on card : _____

Expiry Date: _____

Signature of Cardholder: _____

Receipt required

YES, please list our Business address, phone number & website in the Orange Business Chamber Business Directory which will be available either from the Chamber in printed form or on the website.

This document becomes a Tax Invoice for GST upon payment.