

Email: info@wtcc.com.au
Website: www.wtcc.com.au



P O Box 157
Beaconsfield
Tasmania 7270

West Tamar Chamber of Commerce

President Ph. 6330 3600
Treasurer Ph. 6383 1144

MEMBERSHIP APPLICATION FORM

The Chamber offers the following membership:

Full Business Membership - (Entitlement to full services of the Chamber with 1 vote)

Membership Fees: Full Membership \$70.00 p.a.

Business/Company Name.....

ABN/CAN

Primary and Secondary Contacts

Mr./Mrs/Miss/Ms.....

Actual Business Address:

.....

Postal Address:

Category of Business.....

Phone No: **Mobile:** **Fax No:**

Email Address:

To receive electronic newsletters and other notices)

Website:

Membership Type: Please tick Full

I have enclosed \$.....being the membership fee of the
West Tamar Chamber of Commerce Inc. for the year ending June 30th 2011

Declaration

I hereby apply to become a member of the West Tamar chamber of Commerce and agree to abide by the rules and regulations as set out in its Articles of Association.

Signed..... **Date**.....

Please send fees and completed application form to
The Secretariat, West Tamar Chamber of Commerce. P.O. Box 157 Beaconsfield, Tas 7270