



MEMBERSHIP DETAILS 2011-2012

Full name of Company or Organisation:

Executive Names and Titles:

- first name listed should be representative authorised to vote on behalf of the Company

Type of Business: (for classification purposes)

Location of Office:

Postal Address:

Street Address:

Suburb: State: Postcode:

Telephone No: Fax No:

Email Address:

Please indicate your preferred way to receive notices email fax post

Do you consent for information regarding your business's contact persons, address and phone numbers to be shared with other persons on request? Yes No

Authorising Officer:

Signature:

Date: Cheque: EFT

Electronic Transfer:

BSB 012-750

ANZ, Muswellbrook

Account No

101 871 673

Account Name

Muswellbrook Chamber of Commerce

If paying by electronic transfer it is **ESSENTIAL** to complete the above details and fax or post to

-- Chamber Secretary: **Fax** 6541 1285 or **Post** PO Box 683, MUSWELLBROOK 2333

FEE STRUCTURE

Working Proprietors and Staff

Annual Fee

| | |
|--------------------|----------|
| 1 - 4 | \$75.00 |
| 5 - 10 | \$125.00 |
| 11 - 20 | \$200.00 |
| 21+ | \$300.00 |
| * Associate Member | \$125.00 |

ie Full time equivalent = total hours worked divided by 38 to give number of full-time equivalent staff

Associate Member – “a business that is not resident nor has an active business presence in Muswellbrook”