

Transport/Logistics/Shipping – Imports/Exports

Application Form PAGE 1 OF 2

To the Management Committee,

I wish to apply for membership of the Kalgoorlie-Boulder Chamber of Commerce and Industry Inc.

Annual fee is \$370 plus GST

Government Health/Schools/Education and Training

| Business Contact | | | | | |
|---|--------------|---------|---|----------|--|
| Business Name | | | | | |
| Number of employees | Website | | | | |
| ABN | | | | | |
| General Office Contact | | | | | |
| Telephone | | Mobile | | | |
| Email | | | | | |
| Street Address | | | State | Postcode | |
| Directory Listing: Yes | No | | | | |
| Postal Address | | | State | Postcode | |
| Directory Listing: Yes | No | | | | |
| Membership Contact | | | | | |
| First Name | | Surname | | | |
| Title/Department | | | | | |
| Telephone | | Mobile | Mobile | | |
| Email | | | | | |
| LITTOR | | | | | |
| Optional: Additional Conta | ct for KBCCI | Commui | nications | | |
| First Name | | Surname | Surname | | |
| Email | | | | | |
| Main Industry (please choose one) | | | | | |
| Accommodation/Hospitality/Tourism/Entertainment | | Legal | Legal Services | | |
| Accounting/Banking/Business Services/Finance/ Financial Institutions | | | Media Not for Profit | | |
| Agriculture/Animal Care/Environmental | | | Telecommunications/IT Services | | |
| Commercial Services/Trades/Engineering | | Reso | Resource Mining/Exploration/Oil and Gas | | |
| Construction and Building Services | | | Retail (Purchasing) | | |
| Consulting/Employment Services/OH&S | | Retai | Retail (Services) | | |



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Company Profile

| Please provide a brief statement outlining your company's profile including: • How the business was established • Description of the business • Type of products/services • Main market areas |
|--|
| How did you hear about KBCCI? |
| What attracted you to become a member of KBCCI? |
| Would you like your details to be supplied to CCIWA to take advantage of the complimentary/discounted service agreement? Yes No |
| Would you like your details to be supplied to Business Local to take advantage of the complimentary/discounted service agreement? Yes No |
| Payment Details (Membership will not be processed until payment is received) |
| Cheque of Money Order Attached (Please make cheques payable to KBCCI) |
| Purchase Order Number Mastercard Visa |
| Card holders name |
| Credit card number |
| Expiry date / CVC |
| Signature |
| Return completed form to: Unit 3/58 Egan Street, Kalgoorlie WA 6430 PO Box 10259, Kalgoorlie WA 6433 |

More information, contact KBCCI:

Sophie Hurst - Membership & Event Coordinator

Email: coordinator@kbcci.com.au

Phone: (08) 9021 2466

For Office Use Only

| | Date | Proposer | Seconder |
|--|------|----------|----------|
|--|------|----------|----------|