

# 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 (\$407 including GST)

#### **Business Contact**

Business Name	
Number of employees	Website
ABN	

## **General Office Contact**

Telephone	Mobile	
Email		
Street Address	State	Postcode
Would you like this address listed publicly in the directory?	Yes No	
Postal Address	State	Postcode
Would you like this address listed publicly in the directory?	Yes No	

#### **Membership Contact**

First Name	Surname
Title/Department	
Telephone	Mobile
Email	

## **Optional: Additional Contact for KBCCI Communications**

First Name	Surname
Email	
Main Industry (please choose one)	
Accommodation/Hospitality/Tourism/Entertainment	Legal Services
Accounting/Banking/Business Services/Finance/	Media
Financial Institutions	Not for Profit
Agriculture/Animal Care/Environmental	Telecommunications/IT Services
Commercial Services/Trades/Engineering	Resource Mining/Exploration/Oil and Gas
Construction and Building Services	Retail (Purchasing)
Consulting/Employment Services/OH&S	Retail (Services)
Government Health/Schools/Education and Training	Transport/Logistics/Shipping – Imports/Exports



# Application Form PAGE 2 OF 2

### **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 Coordinator Email: coordinator@kbcci.com.au Phone: (08) 9021 2466

#### For Office Use Only

Date	Proposer	Seconder	
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