



Moora Chamber of Commerce & Industry Inc

Postal Address: PO Box 81, Moora, WA 6510 secretary@moorachamber.com.au

Membership Application Form

Registered Business Name: _____

Business trading Name: _____

Additional Trading Names (when trading under the same ABN)

Trading Name: _____

Trading Name: _____

ABN: _____ Business registration Number: _____

Trading Address: _____

Postal Address (if different) _____

Phone: _____ Fax: _____ Mobile: _____

Email: _____

Website: _____

Preferred contact method: (please circle appropriate method) - **email/phone/mail**

Description of Business Operations: _____

I, being the owner/partner/manager/director, (name): _____ hereby apply for Membership of the Moora Chamber of Commerce and Industry and agree to abide by the MCCI Constitution and its rules of membership. I authorise the Chamber to provide my business details to the Moora Shire and Moora CRC to maintain the Moora Shire Business Directory and Moora Chamber of Commerce website.

Signed _____ Dated: / /

Annual Fees, (please tick as appropriate for your business)

- Hobby business \$50- excludes GST (July – June).
- Small business \$90.00 excludes GST (July – June).
- Corporate \$250 - excludes GST (July – June).

Please make cheques payable to the Moora Chamber of Commerce and Industry or use BSB 036-106 and account number 153253 for direct credits using your business name as the reference. A tax invoice and receipt will be issued on receipt of payment and application is approved by the Committee.

Office use only

Payment details: _____ Amount paid: _____ date paid _____

Date of approval by Executive: _____ Entered on Database _____