



All Correspondence to:

PO Box 233
Culburra Beach 2540

**APPLICATION FOR MEMBERSHIP FORM
CULBURRA BEACH & DISTRICTS CHAMBER OF COMMERCE
(Incorporated under the Association of Incorporation Act, 1984)**

NAME OF APPLICANT

POSITION OF APPLICANT

BUSINESS NAME

NATURE OF BUSINESS

POSTAL ADDRESS

SUBURB

POST CODE

EMAIL

PHONE NUMBERS

(BUSINESS)

(FAX)

(Mobile)

I hereby apply to become a member of the above named Incorporated Association. In the event of my admission as a member; I agree to be bound by the rules of association for the time being in force.

SIGNATURE OF APPLICANT

Date

OFFICE USE ONLY

Amount Paid \$

Date

Receipt Number

Signature of receiver
