

# MEMBERSHIP APPLICATION FORM

Eden Chamber of Commerce Inc.

PO BOX 500

Eden, NSW, 2551

Phone: 02 6496 1953

Email: [secretary@oureden.com.au](mailto:secretary@oureden.com.au)

ABN 20 245 424 925

## Membership Details

**Business Name:**

(One vote per membership)

**Contact Name (1):**

**Contact Name (2):**

**Type of Business:**

**Postal Address:**

**Address:**

**Town:**

**Post Code:**

**State:**

**Business Phone:**

**Website Address:**

**Preferred Main Contact:**

**Email:**

**Mobile:**

**Short explanation of your business:**

*The Eden Chamber of Commerce is a great way to keep in touch with other businesses in your community and stay informed about issues that affect your business.*

*This form can be completed electronically, then please print it out and send it to us at the above address. Thank you!*

## Membership Fees

No of Employee's in your business:

Membership Types: (please tick)

Business 1-3 Employees \$80

Business 4-9 Employees \$150

Business +10 Employees \$300

Private – Not aligned to a Business \$40

*Please note there is no GST on Eden Chamber of Commerce membership.*

If you would like to make a donation to assist us in promoting Eden please tick this box

## Payment

Description	Amount
Membership Fee	
Donation	
Total	

**Payment Method:**

Cheque payable to Eden Chamber of Commerce

Direct Deposit: BSB 641 800 Account 200192400, please use your business name as a reference.

I agree that my email address may be used for any required notices or communication.

**Signature and Date:**

[The Benefits:](#)

- One voice gets action for our town

- Get involved in the direction of our region

- Expand your business by meeting likeminded people

- Benefit from our education programs

PRESIDENT  
Peter Whiter  
0412 327 818

VICE PRESIDENT  
Brad Wills  
0417 814 256

SECRETARY  
Eric Wolske  
0408 240 097

TREASURER  
Kim Harrison-Hewitt  
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