

Membership Application Form
1 July 2023 – 30 June 2024

Applicant Name: _____

Position: _____

Business Name: _____

Business Address: (Street) _____

(Locality) _____ **Postcode:** _____

Contact/Mobile Number: _____ **ABN:** _____

Email Address: _____

I consent to the Kilcoy Chamber of Commerce collecting data via this form. (i) YES _____

MEMBERSHIP: **\$97.00**

Account Details: **Kilcoy Chamber of Commerce & Community Inc**
BSB: **014 619** Account Number: **4515 18976**

In applying for membership to the Kilcoy Chamber of Commerce, I hereby agree by the rules and policies of the Kilcoy Chamber of Commerce Constitution.

Signed: _____ Date: _____
(Signature of Applicant)

(i) Your information will be collected and used in accordance with both the Associations Incorporation Act 1981 (QLD) and the Information Privacy Act 2009.

OFFICE USE: Membership Updated – Date

Signature