

# Kilcoy Chamber of Commerce and Community Inc

[www.kilcovchamberofcommerce.com.au](http://www.kilcovchamberofcommerce.com.au)



**President:** David Dunn Ph: 0438 927 964  
**Treasurer:** Michelle Young Ph: 0422 204 418  
**Secretary:** Suzanne Pointon  
**Committee:** Neil Barradeen  
David Matthews  
email - [secretary@kilcoychamberofcommerce.com.au](mailto:secretary@kilcoychamberofcommerce.com.au)

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Kilcoy Chamber of Commerce and Community Inc

**Northern Gateway to Somerset**

**ABN: 55 042 176 598 Po Box 210 Kilcoy Qld 4515**

## Membership Application Form 2018/19

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Business /Organisation Name: \_\_\_\_\_

Business/Organisation/Individual Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Contact Phone No.: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_ ABN: \_\_\_\_\_

Email Address: \_\_\_\_\_

\* I agree to accept E-Mail forwarding by Management Committee: Yes  No

### Membership Categories Please circle or tick the selected membership category

<b>Business/Rural Enterprise</b> (five or more employees) Full Year...\$70 Half Year...\$35	<b>Business/Rural Enterprise</b> (less than five employees) Full Year...\$50 Half Year...\$25	<b>Community Group/ Organisation</b> Full Year...\$50 Half Year...\$25	<b>Individual</b> Full Year.....\$25 Half Year.....\$12.50
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**NOTE:** Membership is current for financial year - 1<sup>st</sup> July to 30<sup>th</sup> June.

### Please tick your selected payment option:

Cash  EFT

**Account Name:- Kilcoy Chamber of Commerce & Community Inc.**

**BSB: 014 619**

**Acct No: 4515 18976**

New Members joining prior to 31<sup>st</sup> December are liable for the full 12 month subscription

New Members joining after 31<sup>st</sup> December are liable for half the 12 month subscription

**Declaration:** *I hereby agree to abide by the rules of the Kilcoy Chamber of Commerce & Community Inc. constitution*

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(Signature of Applicant)

<b>Office Use Only</b>			
<b>Date Received:-</b> ____/____/____	<b>Receipt Number:-</b> _____		
<b>Amount Paid:-</b> _____	<b>Payment Type:-</b> Cash EFT Cheque		
<b>Membership Type:-</b> Business/Rural>5	Business/Rural<5	Community Group/Organisation	Individual