

**ORBOST CHAMBER OF COMMERCE & INDUSTRY INC**

**APPLICATION FOR MEMBERSHIP TO ORBOST  
CHAMBER OF COMMERCE AND INDUSTRY**

**Business Name**.....

**Business Address**.....

**Owner(s) of Business**.....

**Contact Name**.....

**Contact Phone (Business)**.....**(A.H.)**.....

**Fax** .....

**E-mail** .....

**NOTE : Meeting minutes and other correspondence will be sent to this Email (or Fax if no Email)**

**Signed**.....**Date**.....

**Cheque for \$70 payable to Orbost Chamber of Commerce attached.  
(Send to P.O. Box 558, Orbost 3888)**

**Note: A Tax Invoice/receipt will be supplied.**