

Membership Application

Contact details

Business name _____

Address _____

Suburb _____ Postcode _____

Phone _____

Fax _____

Email _____

Website _____

Contact person/applicant _____

Role _____

Phone _____

Email _____

Business details

Business type/number of employees

Volunteer organisation (Free)

1 to 5 (\$120) 6 to 25 (\$200)

26+ (\$320) National company (\$800)

Outside of Wyndham (\$1200)

Year established _____

Business activity description/main products or services _____

Authorisation:

I hereby authorise the Wyndham Business & Tourism Association (WBTA) to store/use this data in order to send us – free of charge - business opportunities or information on trade shows and exhibitions, projects and events related to our activity sector. I also authorise the WBTA to add our contact details in trade lists prepared for Australian companies or organisations requesting to establish

Payment

Please return this form to:

Wyndham Business and Tourism Association
PO Box 514
Werribee VIC 3030

Payment options:

- **Cheque:** Please mail to the address above

- **Direct debit:**

Quarterly Annually

Account name: _____

BSB: _____ Acct no. _____

Signature: _____

- **Direct deposit:**

Account name: Wyndham Business and
Tourism Association

BSB: 633 000

Account number: 155 587 926

- **Credit card:**

Mastercard Visa

Signature: _____

Card Number: _____

Expiry Date: __ / __

Cardholder Name: _____

CVN: ___ Amount: \$_____

business links or trade relations and in the WBTA's business directories/publications.

I agree I do not agree

Signature _____

Office use only

Date ___ / ___ / ___

Paid \$ _____

Authorised by _____