



MEMBERSHIP APPLICATION FORM

CONTACT DETAILS

COMPANY NAME			
CONTACT PERSON NAME & SURNAME			
YOUR BIRTHDAY	DAY		MONTH
STREET / POSTAL ADDRESS			
TELEPHONE NUMBER		FAX NUMBER	
E-MAIL ADDRESS			

PLEASE INDICATE WHICH OF THE FOLLOWING SERVICES YOU WISH TO RECEIVE

CELL NO (to receive invites to Network functions, Golf Days, etc)		YES	NO
MONTHLY E-MAIL NEWSLETTER	YES	NO	
NATIONAL / INTL E-NEWSLETTERS	YES	NO	
ADVERTISEMENTS	YES	NO	
SIGNATURE		DATE	

We hereby make application for membership of the Oudtshoorn Business Chamber, and agree to be bound by the constitution, rules and regulations of the Chamber in operation during the term of our membership. We acknowledge that resignations must be submitted in writing BEFORE 28 February, failing which the full subscription for the following year is payable.

<u>TURNOVER / OMSET</u>	<u>FEE / FOOI</u>	<u>PAYABLE / BETAALBAAR</u>
0 – 50,000	R50.00	
50,001 – 2,000,000	R250.00	
2,000,001 – 10,000,000	R450.00	
Above / Bo R10m	R2,500.00	

BANKING DETAILS / BANK BESONDERHEDE

ABSA BANK – OUDTSHOORN

BRANCH CODE: 632005

A/C NO: 405 751 4616

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SUPPORT OUR MEMBERS – SUPPORT THE ECONOMY OF OUDTSHOORN