



# Chamber Alliance Program Membership Opt-in

## Local Chamber Member details

Your Local Chamber: **COFFS HARBOUR CHAMBER OF COMMERCE**

Business name (Applicant) \_\_\_\_\_

ACN/ABN \_\_\_\_\_

Street address \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Postal address (if different to street address) \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Direct telephone ( \_\_\_ ) \_\_\_\_\_ Direct fax ( \_\_\_ ) \_\_\_\_\_

Website \_\_\_\_\_

Number of employees \_\_\_\_\_ Industry \_\_\_\_\_

## Primary contact person

Mr/Mrs/Ms/Miss/Dr First name \_\_\_\_\_ Surname \_\_\_\_\_

Job title \_\_\_\_\_

Direct telephone ( \_\_\_ ) \_\_\_\_\_ Direct fax ( \_\_\_ ) \_\_\_\_\_

Mobile \_\_\_\_\_ Email \_\_\_\_\_

I am already a member of the NSW Business Chamber

## NSW Business Chamber membership declaration

I, being the Applicant (or authorised by the Applicant) hereby apply for the Local Chamber Limited Membership of NSW Business Chamber ("NSWBC") as part of the Alliance with our Local Chamber (Coffs Harbour Chamber of Commerce), and agree to be bound by the NSWBC constitution and terms and conditions as amended from time to time and available on the NSWBC website at [www.nswbusinesschamber.com.au/termsandconditions](http://www.nswbusinesschamber.com.au/termsandconditions).

I acknowledge and agree that our NSWBC membership benefits and entitlements are as set out in the attached Schedule to this application. I understand and agree that our membership of the NSWBC is for a period of 12 months and the renewal of our membership for further periods of 12 months each is subject to our Local Chamber renewing the Local Chamber Alliance Agreement with NSWBC each year and our business continuing to be a member of the Coffs Harbour Chamber of Commerce. I understand and agree that our NSWBC membership benefits and entitlements may vary by agreement between the NSWBC and the Coffs Harbour Chamber of Commerce.

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Print Name \_\_\_\_\_

> Call 13 26 96

[nswbusinesschamber.com.au](http://nswbusinesschamber.com.au)

**PLEASE COMPLETE AND RETURN THIS FORM TO:  
THE COFFS HARBOUR CHAMBER OF COMMERCE**

**By Email: [exo@coffschamber.com.au](mailto:exo@coffschamber.com.au), Fax: 02 6651 4081 or Post to: P.O. Box 176 Coffs Harbour, NSW 2450**



## LOCAL CHAMBER LIMITED MEMBERSHIP PACKAGE

Schedule of benefits available to Coffs Chamber Members:

<b>NSWBC Membership</b>	
<u>Existing Full NSWBC Members</u> : Full NSWBC Membership at a discounted rate on next renewal of membership on condition of retaining Local Chamber membership.	Yes
<u>Local Chamber Members</u> : Opportunity to obtain full NSWBC Membership at a discounted rate on condition of retaining Local Chamber membership.	Yes
<b>Connections Offering</b>	
Voting Rights and Regional Councillor, Councillor, Director or Office Bearer Roles	No
Business Hotline	Yes
Member Directory	Yes
E-News	Yes
Business Magazine	Yes
Australian Business Industrial Free Membership	No
<b>Business Support Information</b>	
Modern Awards Service	No
Limited "Ask Us How" Business Guides	Yes
Limited Business Legal Toolkit	Yes
Business Vitality Express Check	Yes
Limited Access to business tips and support information in member only area	Yes
Free trials to WorkPlace Info and WorkPlace OHS (14 days)	Yes
Local Chamber Member rates on limited products and services	Yes
<b>Ask an Expert</b>	
Workplace IR Advice	3
Other Ask an Expert Advice	No
<b>Engage an Expert</b>	
Legal and Consulting Services discount	No
Trade Consulting discount	No
Member rates on trade documentation	No
Local Chamber member rates on Events	Yes