

# Commerce North West Membership Application

## Business Applicant Details

Business Name	
Street Address	
Suburb	
State	
Postcode	
Contact Phone	
Contact Name	
Contact Email	
Tell us about your business.	
<input type="checkbox"/> Would you like to participate in our buy local gift card program?	
<input type="checkbox"/> Would you like us to contact you regarding partnership offers?	

Please attach your business capability statement and business logo if available.

## Preferred Payment Method - Please Select

- ☐ Purchase Order  
☐ Check  
☐ Direct Deposit      Direct Deposit and Cheques to  
Commerce North West Inc.  
BSB: 704-640 A/C: 84614  
☐ Pay in Person  
☐ Credit Card\*
- ☐ Mastercard  
☐ American Express  
☐ Visa

Card Number:

Expiration Date:

Cardholder Name:

CVV:

\*Credit Cards incur a 2% fee and will only be charged on membership approval.

## Membership Class - Please Select

Number of Employees <i>Full time equivalent</i>	Annual Membership <i>(incl. GST)</i>
<input type="radio"/> 1 employee	\$200
<input type="radio"/> 2 to 5 employees	\$300
<input type="radio"/> 6 to 20 employees	\$500
<input type="radio"/> 21 to 60 employees	\$800
<input type="radio"/> 61 and over employees	\$1000
Total (incl. GST)	

### Commerce North West

22 West Street Mount Isa 4825

Phone: 07 4743 9881

Fax: 07 4743 7266

ABN: 20 679 295 842

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

Once you have submitted this form it will be sent to our board for approval.

If your membership is approved, an invoice will be emailed to the address you have provided above.

Payment is only required to be made on provision of an invoice and board approval of this membership application.

[Click here to submit this form to Commerce North West via email](#)