



Membership Application Form

Name:

If joining as a Business.

Business Name:ABN.....

Address:

Postal Address:

Phone:..... Fax:..... Mobile:.....

Email:

Website:

Brief description of your business – Services provided:.....

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If duly accepted, I/we undertake to comply with the current constitution and the rules of the chamber and will do my/our utmost to support the activities of the chamber and promote its objectives and programs.

Applicants Name..... Signature.....

Please return your application with payment of \$95 for Businesses \$50 for Individuals.
The application can be mailed to office address, emailed to Membership@acconline.org.
Read more at www.acconline.org

Direct deposit : Commonwealth Bank of Australia Ltd BSB 062- 300 Account 1043 5896
SWIFT code: CTBAU2S (please include applicants name in transaction reference)

Cheques : 81 Carnarvon St, Silverwater NSW 2128
(cheques payable to Australian Croatian Chamber of Commerce Inc)

Note: Credit Card payment available. Special conditions apply.

Please contact us at contact@acconline.org