



# ALDERNEY CHAMBER OF COMMERCE

## MEMBERSHIP SUBSCRIPTION APPLICATION FORM



*Please complete and submit this form, together with your payment of £25 by cheque or cash to*

### **Alderney Chamber of Commerce**

Membership Secretary

P.O. Box 74

Alderney GY9 3BZ

*.....or drop it into the offices of Bell & Co at No. 3 Victoria Street*

I/We wish to apply for Membership of the Alderney Chamber of Commerce

Name of Firm or Company: \_\_\_\_\_

Nominated Representative: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Post Code: GY \_\_\_\_\_

Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

e-mail: \_\_\_\_\_ Website \_\_\_\_\_

Facebook: (please give URL) \_\_\_\_\_

Nature of your Business: \_\_\_\_\_

\_\_\_\_\_ Number of Employees: \_\_\_\_\_

### **Payment of Registration Fee - Please tick the appropriate box:**

I/We enclose the sum of £25 being the subscription for this current year

I/We wish to pay by Bank Transfer

I/We wish to pay by Standing Order

### **Our Bank Details are below:**

Bank: **HSBC**

Account: **Alderney Chamber of Commerce**

Sort Code: **40-22-25**

Account No. **81086057**

**Please quote Ref: MA/(followed by your company name) with your payment**

**Date** \_\_\_\_\_

**Signature** \_\_\_\_\_

### **FOR OFFICIAL USE ONLY:**

Date application received: \_\_\_/\_\_\_/\_\_\_

Date and amount received: \_\_\_/\_\_\_/\_\_\_

Date application considered: \_\_\_/\_\_\_/\_\_\_

Date application approved: \_\_\_/\_\_\_/\_\_\_

Date applicant informed: \_\_\_/\_\_\_/\_\_\_