



Accelerate Your Business

Tax Invoice

ABN 83 843 386 940

Benefits of Membership

- Web listing with a link from NWBDC to your website.
- Copy of our business newsletter "Time Out" (Circulation 2,500)
- Notification of important business updates including new legislation, budget overviews etc.
- The opportunity to sponsor door prizes and promote your business at Network Events
- Special members rates to attend Network Events
- 20% discount on Boardroom and Training Room hire at Todd Street Business Chambers

Name _____
Company Name _____
Position _____
Address _____
Postcode _____
Telephone _____
Facsimile _____
Mobile _____
Email _____
Industry Type _____
Website _____
ABN _____

North West Business Development Centre Inc
Todd Street Business Chambers
6 Todd Street
Port Adelaide SA 5015
Phone: 08 8440 2440 Fax: 08 8440 2401
Email: coordinator@nwbusiness.com.au

www.nwbusiness.com.au

Web Listing Categories

Please indicate the relevant business category for your business (please tick):

- | | |
|---------------------------------|--------------------------|
| Agriculture/Horticulture/Garden | <input type="checkbox"/> |
| Arts and Culture | <input type="checkbox"/> |
| Business Services | <input type="checkbox"/> |
| Community Services | <input type="checkbox"/> |
| Education | <input type="checkbox"/> |
| Manufacturing/Engineering | <input type="checkbox"/> |
| Personal Services | <input type="checkbox"/> |
| Retail/ Wholesale | <input type="checkbox"/> |
| Transport/Storage | <input type="checkbox"/> |
| Tourism & Hospitality | <input type="checkbox"/> |
| Other | <input type="checkbox"/> |

Category for Website profile (please tick):

- | | |
|----------------|--------------------------|
| Small Business | <input type="checkbox"/> |
| Corporate | <input type="checkbox"/> |
| No Web Listing | <input type="checkbox"/> |

I hereby apply for membership

- | | | |
|----------------|---------------|--------------------------|
| Small Business | \$110 inc GST | <input type="checkbox"/> |
| Corporate | \$275 inc GST | <input type="checkbox"/> |

Payment Details

- Cheque (made payable to North West Business Development Centre Inc)

Card Type:

- Visa Mastercard

Card Number: _____

Expiry Date: _____ CCV _____

Signature: _____

Date: _____