



PO Box 70,  
Boggabri NSW 2382  
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## MEMBERSHIP FORM 2025/2026

BUSINESS NAME:

ADDRESS:

PHONE/S:

EMAIL:

FACEBOOK / LINKEDIN / INSTAGRAM:

CONTACT PERSON:

TYPE OF BUSINESS:

OPENING HOURS:

DESCRIPTION OF BUSINESS (To use as advertising for Webpage etc):

MEMBERSHIP TYPE  
REQUESTED:

STANDARD MEMBERSHIP  
(\$65 pa)

CORPORATE MEMBERSHIP  
(\$500 pa)

To proceed with your application, kindly return the completed membership form.

Upon receipt, the Boggabri Business Chamber will issue a **tax invoice**, with payment requested within **14 days**.

Please note that the Boggabri Business Chamber reserves the **right to decline membership applications** at its sole discretion, without the need to provide justification or recourse.