

Kindly email the completed form to: ntombifuthi@ilembechamber.co.za

For queries please contact: 087 354 6343

BUSINESS DETAILS

Business Name:

Date Joined:

Number of Employees:

Telephone No.:

Company Reg No:

Vat No:

Physical Address:

Postal Address:

Town:

Town:

Postal Code:

Postal Code:

District:

Web Address:

COMPANY REPRESENTATIVES

(These individuals will be added to our database to receive business related information from the Chamber.)

Name	Designation	Mobile	Email

Marketing Representative:

Email:

BUSINESS DESCRIPTION

Sector:

Profile Of Your Business For Publication on the Chamber's Website (75 Words Or Less):

ANNUAL MEMBERSHIP FEES

Category	Fee 2017/18	Debit Order
Ind Member	R750	
1 - 3 Empl.	R1 050	R1 200
4 - 10 Empl.	R2 050	R2 400
11 - 20 Empl.	R2 750	
21 - 50 Empl.	R3 450	
51 - 100 Empl.	R6 800	
101 - 150 Empl.	R10 300	
151 - 250 Empl.	R18 300	
Corporate Members	Negotiated	
NPO Members	No Fee Payable	

Annual fees are valid from 1 April to 31 March and are adjusted on a pro rata basis.

Payment terms are 30 days from date of invoice.

Debit order payment arrangements are available.

In line with para 3.4.3. of the iLembe Chamber Constitution, annual membership is automatically renewed.

I agree to the terms and conditions of membership, including the payment of membership fees as outlined in the Constitution, which can be viewed on the Chamber website at www.ilembechamber.co.za.

Name: _____ on this ____ day of _____ 20 ____ Signature: _____

FOR OFFICIAL USE ONLY

Invoiced amount:

Date invoiced:

* All members are requested to submit a high-resolution company logo with this completed membership form.

* Please ensure that your business profile adequately and professionally describes your business. The submitted wording will not be edited prior to be published on the Chamber website.