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Business Name ………………………………………………………………………………………………………………………………………

Address …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

Postcode ………………………………………………Telephone ......................................................................................

Business Email Address..................................................................................................................................

Email address of company representative (if different)
Additional contact (s) (name and email
Can customers find you online?

Website …………………………………………………………………………………………………………………………………………………….

 ……………………………………………………………………………… ……….………………………………...……………………….
Business Category (Please select one option from the Business Category list) …………………………………………...

Business Classification (s)(Please provide key terms for services that you provide to help us further categorise your business)

EG: A hotel could be classified

 1. .......................................................................................................................

as Holiday Accommodation, Bar/ 2. .......................................................................................................................

Restaurant, Hotel or Event Venue 3. .......................................................................................................................
Business Description (This will help visitors to our website find and understand your business)

(30 words maximum) ....................................................................................................................................................................................

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…………………………………………………………………………………………………………………………………………………………………..

Reason for joining Chamber ……………………………………………………………………………………………………………………………………………………………………

Referral by:……………………………………………………… Company ……………………………………………………………………………….

I wish to apply for my business to become a member of Inverness Chamber of Commerce.

I enclose our cheque / I have made a BACS payment / I have provided credit/debit card details/I have completed a Direct Debit mandate form (**delete as appropriate and see overleaf for details**) for the

appropriate membership fee. (minimum term 12 months).

I understand that my business will be regarded as a member from the time of application pending

formal approval by the Chamber’s Board of Directors.

I consent to the information below being held on the Inverness Chamber of Commerce database and website and being made available to other members through its membership directory.

**Signed: Print name: Date:**

**MEMBERSHIP FEES 2023**



Membership fees are based on choice-based packages outlined in our brochure, and include a £55 admin fee.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|   | NET |  VAT (at 20%) | **TOTAL FEE** | **Tick if paying** **Total Fee (Card, Cheque or BACS)** | **Paying****Monthly** | **Tick if paying Monthly.** **(Direct Debit)** |
| Resilience  | £330.00 | £66.00 | £396.00 |   | £33.00 Per Month |   |
| Essential  | £575.00 | £115.00 | £690.00 |   | £57.50 Per Month |   |
| Growth | £985.00 | £197.00 | £1182.00 |   | £98.50 Per Month |   |
| Corporate | £1455.00 | £291.00 | £1746.00 |   | £145.50 Per Month |   |
|  |  |  |  |  |  |  |
| **Membership will be automatically renewed on your renewal date unless notice is given to cancel membership. Please see our Full Terms and Conditions.**  |

 Metropolitan House
 31-33 High Street
Inverness

IV1 1HT

Telephone: 01463 718131

Email: info@inverness-chamber.co.uk

Web: www.inverness-chamber.co.uk

 ***Inverness Chamber of Commerce***

Cheques should be made payable to
**Inverness Chamber of Commerce**.

BACS payments to:-
**Account No: 16748407 Sort Code: 83-23-10**

If you wish to pay by direct debit please return the
completed mandate with your application.

A VAT receipt will be issued on approval by the Chamber Board. VAT No: 682 8484 87

To pay total fee by credit or debit card, please complete this section:

Card type ...................................................................................................................................................................

Number .....................................................................................................................................................................

.

Security code ....................................................... Expiry date ................................................................................

Name on card ............................................................................................................................................................

Signature