**Membership Application**

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| --- | --- | --- |
| **Business Name** |  | |
| **Business Address, including Postcode** |  | |
| **Contact Name(s)** |  |  |
| **Position** |  |  |
| **Email** |  |  |
| **Telephone Number** |  |  |
| **Mobile Number** |  |  |
| **Company website** |  | |
| **Twitter and Facebook details (if applicable)** |  | |

Please return with your payment of £40 to Sylvia Collins, Treasurer, Bridport Business Chamber Tel: 0787 035 9760

**treasurer@bridportbusiness.org.uk**

Preferred method of payment by Bank Transfer with the following details:

Sort Code 60-03-29

Account Number 87677342

By post: Bridport Business c/o 246 Orchard Avenue, Bridport DT6 5RL.

Please make cheques payable to **Bridport Chamber of Trade and Commerce**.