

Expressions of Interest

MOUNT GAMBIER CHAMBER OF COMMERCE



MOUNT
GAMBIER
CHAMBER OF
COMMERCE

Expression Of Interest Form

Full Name:

Occupation:

Business:

Work Postal Address:

Physical Address if different from above:

Mobile Number:

Email:

Why you are seeking this appointment?

What kind of contribution do you may wish to make?

Declaration:

I declare that I have an interest in becoming a member of the Mount Gambier Chamber of Commerce Executive Committee. I will support its objectives and act in an ethical manner. I will adhere to all policies and procedures and will undertake to complete a confidentiality agreement and annual Conflict of Interest declaration.

On acceptance to the Committee I understand that some information supplied in this application may be used in publications, submissions and/or reporting for funding bodies where details of the expertise of the Committee is required.

Signature of Applicant:

Date:

