



# Membership Application

Please select one of the following sectors that best describes your business

**operations:**

- Manufacturing  Tourism  Construction  Professional  Retail/Distribution  Service  Financial   
 State Organisation/Local Authority  Hospitality Sector  Film & TV Production

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_

Web Address: \_\_\_\_\_ No. of Employees: \_\_\_\_\_ Do you Export? \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**Management Contact Network:**

Please give contact names and e-mail addresses of others you wish to be included on our Chamber information mailing database as Chamber members on behalf of your company.

Name:	E-mail Address:	Mobile Telephone No.

How did you hear about Chamber? \_\_\_\_\_

What year did your business commence? \_\_\_\_\_

Please note it is Chamber policy not to pass on personal e-mails to third parties. Your general e-mail address will be included in our Membership Directory unless you state otherwise. We will add all email addresses and mobile numbers provided on this form to our mailing database, so that we can keep you informed of Chamber events and activities. You have the right to object to our holding your information at any time.

Please tick this box to provide permission for us to use your contact details as described above.

**Please return the application form to:**

Kilkenny Chamber  
11 Patrick Street  
Kilkenny

Tel: 056 7752767 / 056 7752261

[admin@kilkennychamber.ie](mailto:admin@kilkennychamber.ie)

For Office Use Only	
Accounts:	<input type="checkbox"/>
Payment Received:	<input type="checkbox"/>
C. Contact Update:	<input type="checkbox"/>
MindaClient:	<input type="checkbox"/>
Database Update:	<input type="checkbox"/>
Website Update:	<input type="checkbox"/>
Newsletter:	<input type="checkbox"/>
Email to President	<input type="checkbox"/>