



HAWKESBURY CITY CHAMBER OF COMMERCE INC.

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membership@hawkesburychamber.com.au

Contact Details Update Form

Full Name of Business: _____

Business Address: _____

Postal Address (if different): _____

Telephone: _____ **Facsimile:** _____

Mobile #: _____ **Email:** _____

Contact Name: _____

Position: _____

Website: _____

Privacy: The information you provide on this form will be included in our Member's Data Base. This is distributed to all members of the Chamber and included in the Business Directory of our website. Your business name and phone number may also be provided to members of the public wanting to contact you. If you do not wish these details to be released, please tick here. ()