



اتاق بازرگانی نروژ و ایران

Norwegian Iranian Chamber of Commerce

NORWEGIAN IRANIAN CHAMBER OF COMMERCE MEMBERSHIP APPLICATION

New Membership Renewal

COMPANY INFORMATION:

Application Date: _____

Company Name

(as you would like it to appear in our directory): _____

Address:

City, State, Zip:

Main Phone: (____) _____ Web

Site: _____

Business

Category: _____

Additional Business Category:

Number of Employees: _____

Were you referred to the Chamber by another business? ____ Yes ____ No

Referring Company:

Have you been in contact with someone on our membership team? ____ Yes ____ No

Membership Team Member:

Please give a brief description of your business (35 words or less): _____

Expectations of Chamber membership:

Contact Information:

Primary Contact Name: _____

Title: _____

Phone: (____) _____ Email: _____

Billing Information:

Billing Contact Name: _____

Title: _____

Address: _____

City, State, Zip: _____

Phone: (____) _____ Email: _____

MEMBERSHIP INVESTMENT

Membership : Nok 8,000

*Thank you! A member services representative will contact you soon to finalize your application.
If you have any questions, call us at 96698466 or email: info@norway-iran.com*

Grensen 3 0159 Oslo | Phone +47 96698466

Visit us online at: www.norway-iran.com