**Please complete this form and send it to ‘info@bcc.lu’.**

*Important Notice: Any application form that is not completed in its entirety will not be submitted to the ballot for voting at the AGM. It is the applicant’s responsibility to ensure that the form is completed correctly. The BCC takes no responsibility for any incorrect information entered into this form. The applicant agrees that all the information contained in this form may be used for the purposes of conducting the Council elections at the BCC AGM.*

***Personal Details:***

***Name:*** Click here to enter text.

***Company Name:*** Click here to enter text.

***Job Title:*** Click here to enter text.

***British Chamber of Commerce Details:***

***Type of Membership:*** Choose an item.

***Group Name:*** Choose an item. *(Select ‘NO GROUP’ if you are not a member of a BCC working group)*

***Existing BCC Council Member seeking re-election*** [ ]

***Recommendations for the applicant:***

*Note: Recommendations should be from two different members of the BCC.*

***Recommender 1:*** Click here to enter text. ***Recommender 2:*** Click here to enter text.

***Professional Credentials:***

*Note: 3-4 lines explaining your professional credentials current and immediate past experience.*

Click here to enter text.

***Briefly state why you want to be a Council Member:***

*Note: 3-4 lines of why you want to be a BCC Council member and what you would like to achieve as a council member.*

Click here to enter text.