Full Club Name						_
Street Address						
·						
Postal Address						
Council Area			Electo	rate		
Club Phone				ail		
Primary Contact Person					Mobile	
Position			Email			
Delegate (votes at Clubs SA AGM on						
behalf of club)			Position			
Delegate Email				Delegat	te Mobile	
Please list all other relevant contacts if not listed above						
NAME	POSITION edit as needed			EMAIL		MOBILE
	President / Chair					
	Public Officer					
	Secretary					
	Treasurer					
	Committee	Committee Member				
	Committee	Committee Member				
Paid staff	Members (incl	l social)		Ī		THER INFORMATION
Volunteers		Juniors				mation that will be of use to
Volunteers	Jamors			1		low old your Club is, special events this year
OPENING HOURS	FROM	ТО				
Monday						
Tuesday				†		
Wednesday	-					
Thursday				 		
Friday				†		
Saturday				†		
Saturday		1		ł		

