

Sub-Branch \_\_\_\_\_ Incorporated? **YES / NO**

**Mailing Address:**

Street Number & Address \_\_\_\_\_

SUBURB | POSTCODE \_\_\_\_\_

**Street Address:**

Street Number & Address \_\_\_\_\_

SUBURB | POSTCODE \_\_\_\_\_

Phone: \_\_\_\_\_

Preferred Email for General Sub-Branch Correspondence:  
\_\_\_\_\_

Web Page [www.](#) \_\_\_\_\_

**CONTACT DETAILS**

**PRESIDENT** \_\_\_\_\_

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_

PREFERRED EMAIL (if different to above) \_\_\_\_\_

**SENIOR VICE PRESIDENT** \_\_\_\_\_

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_

PREFERRED EMAIL (if different to above) \_\_\_\_\_

**VICE PRESIDENT** \_\_\_\_\_

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_

PREFERRED EMAIL (if different to above) \_\_\_\_\_

**SECRETARY** \_\_\_\_\_

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_

PREFERRED EMAIL (if different to above) \_\_\_\_\_

**TREASURER** \_\_\_\_\_

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_

PREFERRED EMAIL (if different to above) \_\_\_\_\_

**MANAGER**

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_  
 PREFERRED EMAIL (if different to above) \_\_\_\_\_

**MEMBERSHIP OFFICER**

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_  
 PREFERRED EMAIL (if different to above) \_\_\_\_\_  
 IGT LOGIN NAME \_\_\_\_\_

**(Only members listed on this document are authorised to access the IGT Member database)**

**APPEALS OFFICER**

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_  
 PREFERRED EMAIL (if different to above) \_\_\_\_\_

**ATDP WELFARE ADVOCATE**

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_  
 PREFERRED EMAIL (if different to above) \_\_\_\_\_  
 QUALIFICATION LEVEL \_\_\_\_\_

**ATDP COMPENSATION ADVOCATE**

MOBILE \_\_\_\_\_ HOME NUMBER \_\_\_\_\_  
 PREFERRED EMAIL (if different to above) \_\_\_\_\_  
 QUALIFICATION LEVEL \_\_\_\_\_

I certify that the above named are financial members of the RSL and were eligible for election as officers and committee persons of the Sub-Branch. They were duly elected to the positions set out against their respective names at a duly constituted meeting of the Sub-Branch held on the

**DATE**                    /           /  
**NAME**                    \_\_\_\_\_  
**SIGNATURE** \_\_\_\_\_

Sub-Branch President

**DATE**                    /           /  
**NAME**                    \_\_\_\_\_  
**SIGNATURE** \_\_\_\_\_

Sub-Branch Secretary/Manager

**IMPORTANT:** Failure to submit this document may impact on the compliance of your Sub-Branch and ability to access your member data. Only persons listed on this Appendix A are authorised to access member data. **THIS FORM MUST BE SIGNED AND RETURNED EVERY YEAR.**

**OTHER OFFICE BEARERS**

IMMEDIATE PAST PRESIDENT \_\_\_\_\_

COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____
COMMITTEE PERSON	_____	ROLE	_____

**\*\*\* Please email completed form to [admins@rslvic.com.au](mailto:admins@rslvic.com.au) \*\*\***