



NEW AFFILIATE CLUB INFORMATION FORM

Club Legal Name: _____

Club Trading Name (if different): _____

ASIC Association/Business Number: _____

Legal Address: _____

Primary Contact Name, Email and Phone: _____

President Name and Contact: _____

Vice President Name and Contact: _____

Treasurer Name and Contact: _____

Secretary Name and Contact: _____

Select which Band of insurance coverage you wish to purchase for the first 12 month period:

Indicate Choice	Band	Event Numbers	Cost
	Band 1	1-3 Event Per Year	\$1 010.00
	Band 2	4-7 Events Per Year	\$1 310.00
	Band 3	8-10 Events Per Year	\$1 550.00
	Band 4	11-15 Events Per Year	\$1 910.00
	Band 5	15+ Events Per Year	\$2 510.00

Documents to be provided:

- Minutes of most recent Annual General Meeting.
- Minutes of three most recent committee meetings (or number as available).
- Club constitution, Mission and Vision/Values statements.
- Evidence of not-for-profit intention and processes.

This form is to be completed in conjunction with a new club agreement.