Specialist Group Affiliation Form 2018-19



Athletics Victoria ABN 47 382 664 821 When completed and signed this form constitutes a tax invoice.

Please Note: This form MUST be submitted to Athletics Victoria with completed membership forms for all executive members and delegates listed along with the specified fee. For insurance purposes, office bearers are required to be members of Athletics Victoria, regardless of club category. Affiliation WILL NOT be processed unless all paperwork has been received. Submission of AV forms offline include a \$10 processing fee.

	ils		* General enquiries will be directed i	to your club's email address (listed	below)
Group Name					
Group Type	Event Organiser	Athletic Organisation	AV Specialist Group	Recreational Running Clu	υb
Address	Street Addr	ress/PO Box	Suburb/Town	Postcode	
Website					
roup email*					
Office Bea	rers				
President*	Name			Member #	
Secretary	Name			Member #	
Treasurer	Name			Member #	
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