



NOTIFICATION OF CHANGE OF OFFICE BEARERS AND/OR CLUB CONTACT INFORMATION (Refer Dogs Victoria regulation 3.4.3.4)

| | | | |
|---|--|------------------|--|
| Affiliate Name: | | | |
| Incorporation No: | | | |
| Affiliate Address: | | | |
| Affiliate Email: | | Affiliate Phone: | |
| The following Office Bearers were elected at the _____ meeting held on: | | (Date) | |
| (Please attach copy of relevant minutes) | | | |

| | | | |
|---|------------|----------------|------------|
| PRESIDENT | | | |
| Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> (please specify): | | | |
| First Name: | | Last Name: | |
| Email Address: | | Membership No: | |
| Address: | | State: | Postcode: |
| Phone (H): | Phone (B): | | Phone (M): |

| | | | |
|---|------------|----------------|------------|
| SECRETARY | | | |
| Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> (please specify): | | | |
| First Name: | | Last Name: | |
| Email Address: | | Membership No: | |
| Address: | | State: | Postcode: |
| Phone (H): | Phone (B): | | Phone (M): |

| | | | |
|---|------------|----------------|------------|
| VICE PRESIDENT | | | |
| Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> (please specify): | | | |
| First Name: | | Last Name: | |
| Email Address: | | Membership No: | |
| Address: | | State: | Postcode: |
| Phone (H): | Phone (B): | | Phone (M): |

| | | | |
|---|------------|----------------|------------|
| TREASURER | | | |
| Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> (please specify): | | | |
| First Name: | | Last Name: | |
| Email Address: | | Membership No: | |
| Address: | | State: | Postcode: |
| Phone (H): | Phone (B): | | Phone (M): |

t: 9788 2500 f: 9788 2599

events@dogsvictoria.org.au

655 Westernport Hwy Skye, VICTORIA 3977

www.dogsvictoria.org.au