



A BODY OF AFFILIATED PAST APEXIAN GROUPS

## BRANCH REGISTRATION FORM

PLEASE COMPLETE AND RETURN TO NATIONAL SECRETARY BEFORE 31 DECEMBER.

ONLY FINANCIAL MEMBERS OF AFFILIATED BRANCHES ARE COVERED BY PUBLIC LIABILITY INSURANCE

Branch Name ..... Date .....

Name of President .....

Address .....

..... State ..... Post Code .....

Phone: (Home) ..... Work ..... Mobile .....

Email: (Home) ..... Work .....

Name of Secretary .....

Address .....

..... State ..... Post Code .....

Phone: (Home) ..... Work ..... Mobile .....

Email: (Home) ..... Work .....

Meeting Frequency (if fixed) .....

Membership Details: No of members ..... x \$2.00 = \$.....

MAKE CHEQUE PAYABLE TO  
APEX 40 NATIONAL ACCOUNT

PLEASE RETURN THE CHEQUE AND THE  
COMPLETED REGISTRATION FORM TO:

Pamela Richardson  
90 The Boulevard  
National Secretary/Treasurer Apex 40  
SHEARWATER TAS 7307

A LIST OF MEMBERS' NAMES,  
ADDRESSES, PHONE NUMBERS & EMAIL  
DETAILS FOR THE NATIONAL  
DATABASE MAY BE EITHER ATTACHED  
TO CHEQUE OR SENT AS AN  
ELECTRONIC FILE TO  
[richpamela@bigpond.com.au](mailto:richpamela@bigpond.com.au)

If your Branch is now obsolete, please advise me. Save money for Apex 40.

RECEIPT NO: .....

DATE .....