**CLUB COMMITTEE CONTACT DETAILS**

UniSA Sport requires all of its Club Committee Members to complete this form annually to ensure accurate and timely correspondence and compliance with the rules of UniSA Sport. By completing this form you are also giving permission for UniSA Sport to contact you in regards to your nominated club.

|  |  |  |
| --- | --- | --- |
| Club Name: | |  |
| Training Location: | |  |
| Club Email: | |  |
| **PRESIDENT** | | |
| Name: |  | |
| Address: |  | |
| Email: |  | |
| Mobile Phone: |  | |
| **SECRETARY** | | |
| Name: |  | |
| Address: |  | |
| Email: |  | |
| Mobile Phone: |  | |
| **TREASURER** | | |
| Name: |  | |
| Address: |  | |
| Email: |  | |
| Mobile Phone: |  | |
| **OTHER BOARD/COMMITTEE MEMBERS** | | |
| 1. Name: |  | |
| Position |  | |
| Email: |  | |
| Telephone: |  | |

Continue overleaf

**OTHER BOARD/COMMITTEE MEMBERS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 2. Name: |  | | | | |
| Position |  | | | | |
| Email: |  | | | | |
| Telephone: |  | | | | |
| 3. Name: |  | | | | |
| Position |  | | | | |
| Email: |  | | | | |
| Telephone: |  | | | | |
| 4. Name: |  | | | | |
| Position |  | | | | |
| Email: |  | | | | |
| Telephone: |  | | | | |
| 5. Name: |  | | | | |
| Position |  | | | | |
| Email: |  | | | | |
| Telephone: |  | | | | |
| \*If you require more space, please provide a new page or write on the back | | | | | |
| **CORRESPONDENCE AND DELEGATIONS** | | | | | |
|  | | President | Secretary | Treasurer | Other Committee Member (Specify #) |
| Day-to-day correspondence | |  |  |  |  |
| Finance inquires and invoices | |  |  |  |  |
| Competition enquiries (Uni Nationals, etc) | |  |  |  |  |
| Membership & Registration enquiries | |  |  |  |  |

By signing this form you are giving permission to UniSA Sport to send you relevant information about upcoming UniSA Sport and AUS events. You are also allowing your details to be published on the UniSA Sport website for students to get in contact with the club directly.

|  |  |  |  |
| --- | --- | --- | --- |
| Form Completed by: |  | | |
| Signature: |  | Date: |  |