

CLUB INFORMATION 2020

NAME OF CLUB: _____

CLUB POSTAL ADDRESS: _____

PRESIDENT: _____ Phone (Bus): _____

(Mobile): _____ Email: _____

SECRETARY: _____ Phone (Bus): _____

(Mobile): _____ Email: _____

TREASURER: _____ Phone (Bus): _____

(Mobile): _____ Email: _____

Please tick the above box/s next to the e-mail address you wish to receive regular e-mails with all information from ASNA. List below any other e-mail address you wish to be added to this group.

Club contact e-mails: _____

CLUB COLOURS: Name 2 predominant colours: _____

Name secondary colours: _____

1) DRESS: (Describe) _____ BIBS: _____

2) BODY SUIT: _____ BIBS: _____

3) SKIRT: _____ TOP: _____ BIBS: _____

PERSONS AUTHORISED TO APPROVE CLEARANCES:

| NAME | POSITION | SIGNATURE |
|------|----------|-----------|
|------|----------|-----------|

| | | |
|--|--|--|
| | | |
| | | |
| | | |