



Office Bearers Form

(All Personal Information collected will be handled securely in accordance with ACTA Privacy Principles)

Club: _____

Mailing Address for Club Correspondence:

Mailing Address for Accounts:
(mark "Same" if same as Club Address)

Please provide details for one official of the club to be listed as a public Contact Person on the ACTA Website.

Name: _____ Position: _____

Phone: _____

Officials	Name	Contact Details
President		H:
		W:
		Fax:
		Mob:
		E-mail:
Secretary Responsible for Accounts Please tick if applicable <input type="checkbox"/>		H:
		W:
		Fax:
		Mob:
		E-mail:
Treasurer Responsible for Accounts Please tick if applicable <input type="checkbox"/>		H:
		W:
		Fax:
		Mob:
		E-mail:
Club Delegate Representative of club at ACTA AGM		H:
		W:
		F:
		Mob:
		E-mail:
CTSN Shoot Results Editorials		H:
		W:
		F:
		Mob:
		E-mail:

Number of Layouts

Club: _____

Layout	Number	Layout	Number
Trap	_____	Skeet	_____
ISSF Trap	_____	ISSF Skeet	_____
Ball Trap	_____	Sporting Clays	_____
Other:	_____		

Club Location:

Additional Comments:
