

WAB BRANCH INFORMATION 2023/2024

This form must reach WAB Admin no later than 17/7/2023 to ensure accurate information in the WAB Directory

Please scan and email form to wabinsa@gmail.com or post to PMB 50, Naracoorte SA 5271

Branch name									
Branch President or Facilitator	Name (please prin Postal Ad	nt full name) dress							
	Ph		Mobile			Fax			
	Email								
Branch Secretary		t full name)							
	Postal Address								
	Ph		Mobile				Fax	Fax	
	Email								
Branch Treasurer	Name (please print full name)								
	Postal Address								
	Ph		Mobile			Fax			
	Email						•		
Regular date/time of meetings		(eg 4 th We month at	-						
Name of months in recess			, , ,						
Month AGM held									
Number of Full members (\$45 Levy)		Nr of members over the age of 80 years (\$35 Levy)		Number of 60 year Award Members (no levy due)			Nr of Associate Members (\$15 Levy)		
Total members								Please list your Associate Members on your Branch Member List	
Signature:						Date			
						Office date	ed /	/	