For office use only: Copied	Group No:	Date Received	UWA STUDENT
2023 GROUP F	REGISTRATION	FORM	
Pursuant to Regulation	614 UWA Student Guild	Election Regulations	
Group Name:		Group's Colour:	
REGISTRATIO	N OF A GROUP	AGENT	
Group Agent Name:		UWA Student Number: _	
Mobile No:	Email Ado	dress:	
Address:			Postcode:
I am 18 (or above) years o I agree to act as Group Ag	gent for the Group		
I have submitted our Grou	p Statement pursuant to Reg	gulation 614(5) via: <u>elections@gu</u>	ild.uwa.edu.au
I have attached a printed of	copy of our Group Statement	t (for the Returning Officer) with t	his registration
I agree to attend the COM	PULSORY Elections Informa	<u>tion Session</u> at 1:00pm on Tuesd	ay 15th August 2023
Group Agent's Signature:		Date:	

GROUP MEMBERS

We the undersigned, consent to the grouping and support the group name as per Regulation 614 UWA Student Guild Election Regulations. We appoint the person nominated above to act as Agent on behalf of the Group.

GROUP MEMBER NAME (please write clearly)	UWA STUDENT NUMBER (please write clearly)	SIGNATURE
RECEIVED BY:		DATE: