

For office use only:

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Group No: _____ Date Received _____



2024 GROUP REGISTRATION FORM

Pursuant to Regulation 614 UWA Student Guild Election Regulations

Group Name: _____ Group's Colour: _____

REGISTRATION OF A GROUP AGENT

Group Agent Name: _____ UWA Student Number: _____

Mobile No: _____ Email Address: _____

Address: _____ Postcode: _____

Please Read Carefully and Tick the five (5) boxes below:

- I am 18 (or above) years of age
- I agree to act as Group Agent for the Group
- Pursuant to Regulation 614(5), I have submitted our Group Statement (*in Word Document or email body format ONLY*) to the Returning Officer by emailing a copy to: elections@guild.uwa.edu.au
- I have attached a printed copy of our Group Statement (for the Returning Officer) with this registration
- I agree to attend the **COMPULSORY Elections Information Session** at 1:00pm on Tuesday 13th August 2024

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 <i>(please write clearly)</i>	UWA STUDENT NUMBER <i>(please write clearly)</i>	SIGNATURE
RECEIVED BY: _____		DATE: _____