



Scouts Australia NSW
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ROVER OFFICE BEARERS AND DELEGATES RETURN

INSTRUCTIONS:

1. This form should be completed at your Annual Report Presentation (ARP) immediately following the election of Office Bearers for the coming year.
2. This form is to be returned to your Region Rover Council or handed to the Region Rover Council representative at your ARP.
3. Region Rover Councils are to forward a copy of this form to the State Office immediately.
4. In the case that a position is vacated a Notification of Adult Member Resignation (Form A4) should be completed to resign the member from that position.

UNIT / COUNCIL DETAILS - PLEASE PRINT CLEARLY IN BLOCK LETTERS

UNIT / COUNCIL _____ REGION _____

MAILING ADDRESS _____
 (if applicable)

STATE _____ POSTCODE _____

Day Time Frequency Location

MEETING DETAILS _____

EXECUTIVE OFFICE BEARERS AND DELEGATES DETAILS - PLEASE PRINT CLEARLY IN BLOCK LETTERS

UNIT LEADER / CHAIRMAN (UNITs please select one) APPOINTED NOT APPOINTED

UNIT Leaders must also complete a YA2 Form (Application for UNIT Leader Appointment) and attach it to this form. YA2 FORM ATTACHED

TITLE _____	SURNAME _____	MEMBER NO								
GIVEN NAMES _____		PREFERRED NAME _____								
ADDRESS _____		DATE OF BIRTH _____								
TOWN/SUBURB _____		STATE _____			POSTCODE _____					
MOBILE PHONE _____		EMAIL ADDRESS _____								

ASSISTANT UNIT LEADER / VICE CHAIRMAN

TITLE _____	SURNAME _____	MEMBER NO								
GIVEN NAMES _____		PREFERRED NAME _____								
ADDRESS _____		DATE OF BIRTH _____								
TOWN/SUBURB _____		STATE _____			POSTCODE _____					
MOBILE PHONE _____		EMAIL ADDRESS _____								

ROVER ADVISER / COMMISSIONER (UNITs please select one) RESPONSIBLE NOT RESPONSIBLE

TITLE _____	SURNAME _____	MEMBER NO								
GIVEN NAMES _____		PREFERRED NAME _____								
ADDRESS _____		DATE OF BIRTH _____								
TOWN/SUBURB _____		STATE _____			POSTCODE _____					
MOBILE PHONE _____		EMAIL ADDRESS _____								

ROVER ADVISER / ASSISTANT COMMISSIONER (NOT RESPONSIBLE)

TITLE _____	SURNAME _____	MEMBER NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GIVEN NAMES _____		PREFERRED NAME _____							
ADDRESS _____		DATE OF BIRTH _____							
TOWN/SUBURB _____		STATE _____			POSTCODE _____				
MOBILE PHONE _____		EMAIL ADDRESS _____							

SECRETARY

TITLE _____	SURNAME _____	MEMBER NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GIVEN NAMES _____		PREFERRED NAME _____							
ADDRESS _____		DATE OF BIRTH _____							
TOWN/SUBURB _____		STATE _____			POSTCODE _____				
MOBILE PHONE _____		EMAIL ADDRESS _____							

TREASURER

TITLE _____	SURNAME _____	MEMBER NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GIVEN NAMES _____		PREFERRED NAME _____							
ADDRESS _____		DATE OF BIRTH _____							
TOWN/SUBURB _____		STATE _____			POSTCODE _____				
MOBILE PHONE _____		EMAIL ADDRESS _____							

ROVER COUNCIL DELEGATE (1)

TITLE _____	SURNAME _____	MEMBER NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GIVEN NAMES _____		PREFERRED NAME _____							
ADDRESS _____		DATE OF BIRTH _____							
TOWN/SUBURB _____		STATE _____			POSTCODE _____				
MOBILE PHONE _____		EMAIL ADDRESS _____							

ROVER COUNCIL DELEGATE (2)

TITLE _____	SURNAME _____	MEMBER NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GIVEN NAMES _____		PREFERRED NAME _____							
ADDRESS _____		DATE OF BIRTH _____							
TOWN/SUBURB _____		STATE _____			POSTCODE _____				
MOBILE PHONE _____		EMAIL ADDRESS _____							

ROVER COUNCIL DELEGATE (3)

TITLE _____	SURNAME _____	MEMBER NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GIVEN NAMES _____		PREFERRED NAME _____							
ADDRESS _____		DATE OF BIRTH _____							
TOWN/SUBURB _____		STATE _____			POSTCODE _____				
MOBILE PHONE _____		EMAIL ADDRESS _____							

ROVER COUNCIL DELEGATE (4)

TITLE _____	SURNAME _____	MEMBER NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GIVEN NAMES _____		PREFERRED NAME _____							
ADDRESS _____		DATE OF BIRTH _____							
TOWN/SUBURB _____		STATE _____			POSTCODE _____				
MOBILE PHONE _____		EMAIL ADDRESS _____							

PUBLIC RELATIONS OFFICER

TITLE _____ SURNAME _____	MEMBER NO								
GIVEN NAMES _____	PREFERRED NAME _____								
ADDRESS _____	DATE OF BIRTH _____								
TOWN/SUBURB _____	STATE _____	POSTCODE _____							
MOBILE PHONE _____	EMAIL ADDRESS _____								

VENTURER LIAISON OFFICER

TITLE _____ SURNAME _____	MEMBER NO								
GIVEN NAMES _____	PREFERRED NAME _____								
ADDRESS _____	DATE OF BIRTH _____								
TOWN/SUBURB _____	STATE _____	POSTCODE _____							
MOBILE PHONE _____	EMAIL ADDRESS _____								

ACTIVITIES COORDINATOR

TITLE _____ SURNAME _____	MEMBER NO								
GIVEN NAMES _____	PREFERRED NAME _____								
ADDRESS _____	DATE OF BIRTH _____								
TOWN/SUBURB _____	STATE _____	POSTCODE _____							
MOBILE PHONE _____	EMAIL ADDRESS _____								

OTHER (1) : _____

TITLE _____ SURNAME _____	MEMBER NO								
GIVEN NAMES _____	PREFERRED NAME _____								
ADDRESS _____	DATE OF BIRTH _____								
TOWN/SUBURB _____	STATE _____	POSTCODE _____							
MOBILE PHONE _____	EMAIL ADDRESS _____								

OTHER (2) : _____

TITLE _____ SURNAME _____	MEMBER NO								
GIVEN NAMES _____	PREFERRED NAME _____								
ADDRESS _____	DATE OF BIRTH _____								
TOWN/SUBURB _____	STATE _____	POSTCODE _____							
MOBILE PHONE _____	EMAIL ADDRESS _____								

OTHER (3) : _____

TITLE _____ SURNAME _____	MEMBER NO								
GIVEN NAMES _____	PREFERRED NAME _____								
ADDRESS _____	DATE OF BIRTH _____								
TOWN/SUBURB _____	STATE _____	POSTCODE _____							
MOBILE PHONE _____	EMAIL ADDRESS _____								

OTHER (4) : _____

TITLE _____ SURNAME _____	MEMBER NO								
GIVEN NAMES _____	PREFERRED NAME _____								
ADDRESS _____	DATE OF BIRTH _____								
TOWN/SUBURB _____	STATE _____	POSTCODE _____							
MOBILE PHONE _____	EMAIL ADDRESS _____								

OTHER (5) : _____

TITLE _____	SURNAME _____	MEMBER NO							
GIVEN NAMES _____		PREFERRED NAME _____							
ADDRESS _____		DATE OF BIRTH _____							
TOWN/SUBURB _____		STATE _____			POSTCODE _____				
MOBILE PHONE _____				EMAIL ADDRESS _____					

OTHER (6) : _____

TITLE _____	SURNAME _____	MEMBER NO							
GIVEN NAMES _____		PREFERRED NAME _____							
ADDRESS _____		DATE OF BIRTH _____							
TOWN/SUBURB _____		STATE _____			POSTCODE _____				
MOBILE PHONE _____				EMAIL ADDRESS _____					

DECLARATION

I have received a copy of, or am aware of, the Scouts NSW Privacy Policy, and I consent to the information collected on this form and through Scouting activities to be used in accordance with the rights and obligations set out in that policy. I also acknowledge that any third party, about whom information on this form has been provided by me, has been informed of the Association's collection of their information and that they are aware of the Scouts NSW Privacy Policy. A copy of the policy is available on our website www.nsw.scouts.com.au

I acknowledge that by completing this form I am requesting the above positions be recorded for those members, and any existing positions be resigned.

THE ANNUAL REPORT PRESENTATION WAS HELD ON _____

NAME OF UNIT LEADER / CHAIRMAN _____

SIGNATURE _____ DATE _____

NAME OF REGION/STATE DELEGATE _____

SIGNATURE _____ DATE _____