

COMMITTEE AFFILIATION 2025

1st January, 2025 to 31st December, 2025

To register for Affiliation please complete all questions.

Committee Name: **

Event Location:

** Please note - CCA Insurance is only able to cover recognised Associations or Clubs.

CONTACT DETAILS

Contact Name :

Position:

Contact Phone:

Contact Email:

Address:

PIC Number:

ABN:

OTHER CONTACT DETAILS

Committee Member Name:

Position:

DECLARATION

We agree to adhere to the Rules and Guidelines and reporting requirements of the CCA including completed Volunteer Registers for each sanctioned Event.

Yes

CCA Affiliation is subject to an annual Fee of \$110 (incl GST) payable upon application.

Yes

CCA - BSB: 124-001 A/C: 2354 9004 - **Please enter your Committee name as Reference**

Signature:

Printed Name / Position:

Date: