

# COMMITTEE AFFILIATION 2026

1st January, 2026 to 31st December, 2026

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: