

APPLICATION FOR ESTABLISHMENT OF LABOR ASSOCIATION

Queensland
Labor



Form I

See Rule 35 for details on how to apply.

Proposed Name of Association _____

Contact person _____ Phone _____

Email _____

Patron Name _____ Signature _____

Intending members

(ALP # = Membership number)

Name _____ ALP # _____ Signed _____
Email _____ Phone _____

Name _____ ALP # _____ Signed _____
Email _____ Phone _____

Name _____ ALP # _____ Signed _____
Email _____ Phone _____

Name _____ ALP # _____ Signed _____
Email _____ Phone _____

Name _____ ALP # _____ Signed _____
Email _____ Phone _____

Name _____ ALP # _____ Signed _____
Email _____ Phone _____

Name _____ ALP # _____ Signed _____
Email _____ Phone _____

Name _____ ALP # _____ Signed _____
Email _____ Phone _____