

2019 Organisation/Club Registration Form

Organisation, Club or Group Name		
Are you a TUU Affiliated Club:	YES	NO
ABN number:		
Public Liability Insurer:		
Copy of Public Liability Insurance attached:	YES	NO
<i>A copy of your current public liability insurance must be provided, please refer to Terms and Conditions of Hire 5a and 5b for further details</i>		

Booking Contact Officer: <i>(Responsible officer: refer to Terms and Conditions for description for duties and obligations)</i>	
Contact Name:	
Mobile Phone Number:	
Phone Number:	
Email Address:	
Address:	

Finance Officer/Treasurer: <i>(Invoices)</i>	
Contact Name:	
Mobile Phone Number:	
Phone Number:	
Email Address:	
Address:	

Have you emailed this registration form to the Bookings Officer:	YES	NO
<i>Unigym Hobart</i> <i>Email Address: unigy mhbt.bookings@utas.edu.au</i> <i>Contact Number: 6226 1923</i>		
<i>Unigym Launceston</i> <i>Email Address: unigym ltn.bookings@utas.edu.au</i> <i>Contact Number: 6324 3092</i>		

OFFICE USE ONLY

DATE RECEIVED

INDUCTION COMPLETED AND FILED

CLIENT PROFILE ENTERED / UPDATED

INSURANCE DETAILS RECEIVED AND FILED

CONFIRMATION AND CLIENT ID

