Lodged By: Name: Address: E-mail: Telephone (BH)	:		

#### **ACT GOVERNMENT**

Associations Incorporations Act 1991 Registrar-General's Office



**A2** Form 702

## **APPLICATION TO AMALGAMATE ASSOCIATIONS**

# PRIVACY COLLECTION STATEMENT (PRIVACY ACT 1988 (C'WLTH)) OVERLEAF

NOTE: THIS FORM IS USED TO APPLY FOR THE AMALGAMATION OF ASSOCIATIONS INCORPORATED UNDER THE ASSOCIATIONS INCORPORATION ACT 1991. AN INCORPORATED ASSOCIATION CANNOT APPLY TO AMALGAMATE WITH ANY ORGANISATION OTHER THAN ANOTHER ASSOCIATION INCORPORATED LINDER THE ACT

1. AN	MALGAMATING	ON OTHER THAN ANOTHER ASSOCIATION INCORPORATED UNDER THE S ASSOCIATIONS AND AUTHORISED APPLICANTS residential address of each applicant – must reside in ACT)	ACI.	
,	Association			
(a)	Name and Number:		Inc.	Α
	Applicant:			
	Association			
(b)	Name and Number:		Inc.	Α
	Applicant:			•
spe	cial resolution	r amalgamation, Section 26(1) of the Act requires that the members of each under Section 70 of the Act, to approve the terms of the amalgamation and the formed by the amalgamation, and the rules being adopted by the new associated by the new associated to the section of the s	ne statem	
thar	the Model Ru	cts of the new association must be attached to this application. If the new as les contained within the Associations Incorporation Regulation 1991, a full coeference Schedule must also be attached.		
notion spectors	ce has been gi cial resolution i	ct requires the special resolution to be passed at a general meeting of the assiven to the members, accompanied by notice of the intention to pass the resolution to be passed by a majority of at least 75% of the votes of those members the general meeting (or by proxy at the general meeting where proxy voting	ution as a who are	a special resolution. The entitled to vote and who
	,	f each amalgamating association must be up to date before the application for	amalgam	ation may be lodged.
2. N/	AME OF NEW	ASSOCIATION TO BE FORMED BY AMALGAMATION	-	ASSOCIATION NUMBER (office use only – assigned upon amalgamation
				A
3. N/	AME AND RES	IDENTIAL ADDRESS OF INAUGURAL PUBLIC OFFICER (must be 18 years	or older	and reside in ACT)
4. Pi	REFERRED PO	STAL ADDRESS		
5. Al	DDRESS AND	HOURS OF REGISTERED OFFICE (optional)		
			om:	:
		То	):	:

An association is not required to have a registered office. If a registered office is established, it must be located at a physical address in the ACT and be open for at least 3 consecutive hours between 9.00 am and 5.00 pm Monday to Friday (excluding public holidays).

Full Name		Address	Position Held	
			<u>.</u>	
INAUGURAL RULES OF A	ASSOCIATION (select only one)			
f the association has adopte	d the Model Rules from the Ass	ociations Incorporation Regulation 1991, pla	ce an 'X' here:	
f the association has drawn	un and adopted its own set of ru	ules in place of adopting the Model Rules, pla	ace an 'X' here.	
T the association has drawn		nes in place of adopting the Woder Raies, pla	doc all X flore.	
DEEDS AND TRUSTS				
	norty doods or	If you a partified copy of each local finance	rial or proporty dood or	
Do any legal, financial or property deeds or trusts exist which affect this association?		If yes, a certified copy of each legal, financial or property deed or trust document which affects this association must be attached.		
adoto oxiot winori anoot tino c		a dot document which another the document	on made be attached.	
STATEMENT BY APPLICA	ANTS			
		the accompanying decuments are true on	d correct that I have bee	
confirm that all of the parti	culais shown on this form and			
	Idamation of the associations i	identified at Item 1, and that the association	nns have nassed a sneci	
authorised to apply for ama		identified at Item 1, and that the association to the amalgamation. I have read the		
authorised to apply for ama resolution in line with S.26(	(1) and S.70 of the Act agreei	identified at Item 1, and that the association ing to the amalgamation. I have read the		
authorised to apply for ama resolution in line with S.26(	(1) and S.70 of the Act agreei			
authorised to apply for ama resolution in line with S.26(Important Information' show	1) and S.70 of the Act agreein below.	ing to the amalgamation. I have read the		
authorised to apply for ama resolution in line with S.26( "Important Information" show	(1) and S.70 of the Act agreei			
resolution in line with S.26( "Important Information" show	1) and S.70 of the Act agreein below.	ing to the amalgamation. I have read the		

Section 9 of the Associations Incorporations Act 1991 provides for the Registrar-General to collect the information for the purpose of establishing and maintaining the register of incorporated associations. The register is available for search pursuant to Section 11 of the Act, to any person upon payment of a fee. The register is also made available to a range of government agencies for law enforcement, administrative and statistical purposes.

#### IMPORTANT INFORMATION

The amalgamation of two or more associations creates a legal entity, under the management of the committee members. The committee members are held accountable for ensuring that the association operates in compliance with applicable laws, including the Associations Incorporation Act 1991 (the Act) and the Associations Incorporation Regulation 1991 (the Regulation). The public officer is responsible for acting as a point of contact between the association and the community, and is expected to be able to represent the association in dealings with this office. The Act prohibits any person from serving as a committee member or the public officer if he/she is insolvent or bankrupt, without leave from the ACT Supreme Court under S.63 of the Act. A search should be conducted of the records held by the Insolvency and Trustee Service Australia (ITSA) before accepting the nomination of a person as a committee member. For more information or to conduct a search, visit the ITSA website at www.itsa.gov.au. Further information on the obligations of incorporated associations can be found in the Associations Kit available from the Registrar-General's Office, and on-line at www.rgo.act.gov.au.

If you need interpreting help, telephone: نساعده في الترجمة الشفوية ، إنصل برقم الهاتف: 如果你需要传译员的帮助,请打电话: ARABIC CHINESE Ako trebate pomoć tumača telefonirajte: Αν χρειάζεστε διερμηνέα τηλεφωνήσετε στο Se avete bisogno di un interprete, telefonate al nu CROATIAN GREEK ITALIAN Αν χρειαζεστε σετριγικα τηλεφονήσετε στο Se avete biogono du in interpretic, telefonate al numero: 
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SPANISH TURKISH Nếu bạn cần một người thông-ngôn hãy gọi điện-thoại: TRANSLATING AND INTERPRETING SERVICE 131 450

#### LOCATION

B1 Level, Allara House, 50 Allara Street. **CANBERRA CITY** 

#### OFFICE HOURS

8.30am to 4.30pm Monday to Friday (excluding public holidays)

#### CONTACT NUMBERS

(02) 62070435 or Phone (02) 62070474 Fax (02) 62070487

### POSTAL ADDRESS

PO Box 225 CIVIC SQUARE ACT 2608