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| Application to register a political party for ACT Legislative Assembly elections | | | | | | | | | | | |
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| **Please read the *“How to register a political party for ACT Legislative Assembly elections - Factsheet”* to assist you to complete this form.**  **This form must be accompanied by:**   * **A copy of the party’s constitution** * **A list of at least 100 members enrolled in the ACT** | | |  | ACT Electoral Commission contact details: | | | | | | | |
| **Email:** | elections@act.gov.au | | | | | | |
| **Postal address:** | GPO Box 172 CANBERRA ACT 2601 | | | | | | |
| **Physical address:** | Nara Centre, 3 Constitution Ave CANBERRA ACT 2601 | | | | | | |
| **Phone:** | 02 6205 0033 | | | | | | |
| **Website:** | [www.elections.act.gov.au](http://www.elections.act.gov.au) | | | | | | |
|  | | | | | | | | | | | |
| Details of proposed party | | | | | | | | | | | |
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| Proposed name of party: |  | | | | | | | | | |  | |
|  | | | | | | | | | | | |
| Proposed abbreviation of party name (if any): |  | | | | | | | | | |  | |
|  | | | | | | | | | | |  | |
| Note: if the party’s name or abbreviation is to include the name of a particular living person, and that name or abbreviation suggests there is a connection between the party and the person, this application must be accompanied by a written notice signed by the person, stating that the person consents to the use of their name in the party’s name/abbreviation and must include the person’s address or indicate that their address is suppressed. | | | | | | | | | | |  | |
| Address for party correspondence: |  | | | | | | | | | |  | |
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|  | | | | | | | | | | | |
| Details of proposed registered officer | | | | | | | | | | | |
|  | | | | | | | | | | | |
| Name of proposed registered officer: | |  | | | | | | | | |  | |
|  | | | | | | | | | | | |
| Address of proposed registered officer:  Address can be residential or business, or the party address, but cannot be a PO box. | |  | | | | | | | | |  | |
|  | | | | | Postcode: | | | |
|  | | | | | | | | | | | |
| Contact phone: | |  | | | | | | | | |  | |
|  | | | | | | | | | | | | |
| Email: | |  | | | | | | | | |  | |
|  | |  | | | | | | | | |  | |
| Signature of proposed registered officer: | |  | | | |  | |  | | |  | |
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| **Application to register a political party for ACT Legislative Assembly elections** | | | | | | | |
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| Details of secretary of party | | | | | | | |
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| Full name of secretary: |  | | | | | |  | |
|  | | | | | | | |
| Formal title of position held in party: |  | | | | | |  | |
|  | | | | | | | |
| Address of secretary:  Address can be residential or business, or the party address, but cannot be a PO box. |  | | | | | |  | |
|  | | Postcode: | | | |
|  | | | | | | | |
| Contact phone: |  | | | | | |  | |
|  | | | | | | | | |
| Email: |  | | | | | |  | |
|  |  | | | | | |  | |
| Signature of proposed registered officer: |  |  | |  | | |  | |
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