

MONSU Caulfield Inc. 2019 ANNUAL ELECTIONS

Monday 16 September - Wednesday 18 September 2019

TICKET REGISTRATION FORM

PLEASE ENSURE YOU WRITE NEATLY AND USE BLOCK LETTERS ONLY

NAME OF TICKET:							
AUTHORISED OFFICER DETAILS							
First Name:			Last Name:				
Student ID:			Email Address:				
Address:							
Mobile Phone Number:							
Signature:							
We, the undersigned, support the registration of the ticket as provided for above and consent to the Returning Officer verifying our enrolment details with the University to determine our eligibility to participate in the election:							
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First Name	e	Last Name	Student ID)	Signature		

First Name	Last Name	Student ID	Signature

First Name	Last Name	Student ID	Signature
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Office Use Only				
	Date Received:	Time Received:	Received By:	