

SES VOLUNTEERS ASSOCIATION of WA (Inc)
MEMBER DELEGATE FORM
ANNUAL GENERAL MEETING

SESVA Board Room, 91 Leake St, Belmont WA

9:00 am SATURDAY 13th SEPTEMBER 2025

Please complete Unit email address details to ensure your Unit can be contacted.

UNIT NAME
SES REGION
UNIT POSTAL ADDRESS
UNIT EMAIL ADDRESS

MEMBER DELEGATE

NAME	
POSTAL ADDRESS	
PHONE	MOBILE
EMAIL ADDRESS	
SIGNATURE	DATE

UNIT AUTHORISING OFFICER

NAME	
POSITION	
EMAIL ADDRESS	
SIGNATURE	DATE

Do you wish to receive the TEAMS Meeting Link to attend the AGM:

If YES, please advise Email address: _____

Completed forms must be returned by close of business on 12th September 2025

Please return via email, marked; **Attention SESVA Returning Officer**

Email: sesva.secretary@ses-wa.asn.au

***Returning forms to any other email address may result in
the form not being received by the Returning Officer in time.***