

**LIMERICK COUNTY
COMMUNITY & VOLUNTARY FORUM
REGISTRATION FORM**

Name of Group/Organisation: _____

Contact Person/Secretary: _____

Address: _____

Tel/Fax/email: _____

Briefly outline the activities & purpose of the Group/Organisation:

Names of Principal Officers (Chairperson, Secretary & Treasurer):

Number of members in Group/Organisation? _____

Length of time in existence? _____

**Does your Group/Organisation have a Constitution/Memorandum of
Articles & Association?**

Yes

No

Has your Group/Organisation held an AGM in the last twelve months?

Yes

No

Signed: _____ **Date:** _____