PERTH U3A: PROPOSED NEW GROUP

Name of Group:
Group Leader:
Address:
Tel. No:
E-mail Address:
Proposed Venue:
Proposed slot in 4 week cycle:
Proposed start date and time:
Frequency:
Have possible numbers been identified? YES (how many?) or NO
Brief description of the group and its activities:
Signed (Group Leader):Date:
When completed send to Groups Coordinator by email.