

**Information Schedule**

**Incorporation of Unincorporated Association  
Under Association Incorporation Act.**

<b>Details:</b>	
Name of Unincorporated Association:	_____
Mailing Address:	_____
Name of Proposed Inc. Association:	_____
Place of Administration:	_____
Nature of Activities:	_____
Full Name of Applicant/ Public Officer:	_____
Address of Applicant/ Public Officer	_____

<b>Details of first members of Committee:</b>		
<u>Full Name</u>	<u>Residential Address</u>	<u>Position</u>
_____	_____	President
_____	_____	
_____	_____	Treasurer
_____	_____	
_____	_____	Secretary
_____	_____	
_____	_____	
_____	_____	
_____	_____	

<b>Ordered by:</b>	
Name:	_____
	(Contact Name) <span style="margin-left: 150px;">(Firm Name)</span>
Address:	_____
Signature:	_____
	Phone No.: _____