



# Townsville Table Tennis Association Inc - NOTICE TO ALL MEMBERS -

## NOTICE TO ALL MEMBERS OF ANNUAL GENERAL MEETING

| **To** | All members of Townsville Table Tennis Association Inc

| **From** | Townsville Table Tennis Association Inc Committee

| **Date of Notice** | 25 October 2017

Dear members,

The Committee would like to invite you to attend the Annual General Meeting (AGM) of the Townsville Table Tennis Association Incorporated, details of which are as follows:-

|                 |   |
|-----------------|---|
| <b>Date</b>     | Sunday, 3 December 2017                                     |
| <b>Time</b>     | 11:30 am  |
| <b>Location</b> | Masonic Centre, 42 Walker Street, Townsville City, QLD 4810 |

Attached are the following documents:-

1. Agenda;
2. Nomination Form: Management Committee;
3. Nomination Form: Selection Sub-Committee; and
4. Proxy Voting Form.

All documents listed above are also available from the Secretary (Rhonda Miller) or from the control desk in the playing centre.

At or before the AGM the following documents will be provided to all members:-

1. President's Report;
2. Treasurer's Report; and
3. Auditors Report.

The purpose of an AGM is to give members a report on our activities and finances for the previous year, to allow time for members to ask questions, and to the new management committee for the coming year. We encourage everyone to be involved and look forward to your participation in the AGM.

Yours faithfully,

*Rhonda*

Rhonda Miller  
Secretary.

Phone 04 152 700 83 | Email: rhonda20miller@gmail.com



| **Meeting Title** | TTTA Annual General Meeting

| **Date** | Sunday, 3 December 2017

| **Time** | 11:30 am

| **Location** | Masonic Centre, 42 Walker Street, Townsville City, QLD 4810

## AGENDA

| NO: | ITEM                                      | SUPPORTING DOCUMENTS/NOTES  |
|-----|---|---|
| 1   | <b>OPENING</b>                            |   |
| 1.1 | Attendance                                |   |
| 1.2 | Proxy Forms                               |   |
| 2.  | <b>PREVIOUS MINUTES</b>                   |   |
| 2.1 | Previous minutes                          | AGM dated 27 November 2016  |
| 2.2 | Matters arising from previous minutes     |   |
| 3   | <b>AUDITOR APPOINTMENT</b>                |   |
| 3.1 | Appointment of Auditor for 2017/2018      |   |
| 4   | <b>PRESIDENT'S REPORT</b>                 |   |
| 4.1 | President's Report                        | Terry Morato  |
| 5   | <b>TREASURER'S REPORT</b>                 |   |
| 5.1 | Treasure's Report and Financial Statement | Brendan Cahill<br>Not for Profit Consultancy Services Auditors<br>Report for year ending 31 August 2017 |
| 6   | <b>ELECTION OF OFFICE BEARERS</b>         |   |
| 6.1 | Election of new office bearers            |   |
| 8   | <b>CLOSURE</b>                            |   |
| 8.  | Closure of meeting                        |   |

**TOWNSVILLE TABLE TENNIS ASSOCIATION INCORPORATED  
NOMINATION FORM : 2017 / 18 MANAGEMENT COMMITTEE**



Being financial members of the Townsville Table Tennis Association Inc., we hereby nominate:

\_\_\_\_\_ *(insert full name)*

for the position of:

President

Treasurer

Vice President

Secretary

General Committee

*(Please tick selection)*

**Nominated by**

**Seconded by**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

*(At least 1 person must be a member of the current management committee)*

\_\_\_\_\_ *(insert full name)*

hereby accept the above nomination and agree to perform the function of the position.

Address: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (M) \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Return to : Secretary  
Townsville Table Tennis Association  
P O Box 185, Castletown QLD 4812  
or email: rhonda20miller@gmail.com

**Lodgement deadline:**

**Sunday 26 November 2017 at 11.30 am (being 7 days prior to the AGM)**

**TOWNSVILLE TABLE TENNIS ASSOCIATION INCORPORATED  
NOMINATION FORM : 2017 / 18 SELECTION SUBCOMMITTEE**



*Note: A subcommittee may be established by the management committee under the Rules for the incorporation association. The subcommittee appointed operate under the directions of the management committee.*

\_\_\_\_\_ (insert full name)

hereby nominate for the position on the subcommittee as a selector for the 2017/2018 year. My nomination is for the following selection subcommittee (select 1 or both):-

|                          |
|--------------------------|
| <input type="checkbox"/> |
| <input type="checkbox"/> |

Junior Selection Subcommittee  
Senior Selection Subcommittee

Duties of the selection subcommittee will include:-

1. Regular local result analysis;
2. Attendance at local ranking events, including fixtures and club events for ratification by the management committee;
3. Selection of Townsville teams for ratification by the management committee;
4. Receive and review regional open tournament results.

**Nominated by**

**Seconded by**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

*(At least 1 person must be a member of the current management committee)*

\_\_\_\_\_ (insert full name)

hereby accept the above nomination and agree to perform the function of the position.

Address: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (M) \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

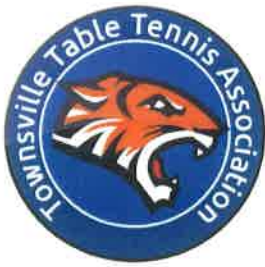
Signature \_\_\_\_\_ Date: \_\_\_\_\_

Return to : Secretary  
Townsville Table Tennis Association  
P O Box 185, Castletown QLD 4812  
or email: rhonda20miller@gmail.com

*The selection committee will be determined by the management committee at a management committee meeting and not at the annual general meeting. This will be completed in terms of the Rules.*

**Lodgement deadline:**

**Sunday 26 November 2017 at 11.30 am (being 7 days prior to the AGM)**



# Townsville Table Tennis Association Inc - Proxy Form -

## ANNUAL GENERAL MEETING

### PROXY FORM

I, \_\_\_\_\_ (insert full name), being a member of the Townsville Table Tennis Association Incorporated ("Association") hereby appoint the person below as my proxy to vote for on my behalf at the Annual General Meeting of the Association to be held on the 3<sup>rd</sup> of December 2017 and/or any adjournment of such meeting

Full Name of Proxy:-

\_\_\_\_\_

Phone Number of Proxy:-

\_\_\_\_\_

Membership Number of Proxy:-

\_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / 2017

Signature \_\_\_\_\_

\_\_\_\_\_

This form is to be used : in favour of the resolution.

: Against the resolution

Or unless otherwise instructed, the proxy may vote as he thinks.