

## OLAVE PROGRAM PEER GROUP REGISTRATION

New Peer Group - Yes / No	Peer Group Name:	District:
Peer Group Name Change - Yes / No	Old Name:	Region:
Reopen Peer Group in Recess - Yes / No	First meeting Date:	Present number in Peer Group:

Meeting Location:	
Meeting Day & Time:	

Olave Peer Group Contact Name:	
Membership ID:	
Email Address:	
Phone No:	
Mobile No:	

**List of Members:**

Olave's Name:	Membership ID:

All members must be financial members of Girl Guides Victoria.

District/Region Manager Name:	Position:
Signature:	Date:

**Note:**

No Olave Peer Group should have a bank account unless authorised by Girl Guides Victoria, if granted a bank account, you must include the words "Girl Guides Victoria" in the account name.

Complete and return to Girl Guides Victoria, Suite 812, 401 Docklands Drive, Docklands VIC 3008

or by email: [membership@guidesvic.org.au](mailto:membership@guidesvic.org.au)