

COUNCIL OF AUSTRALASIAN TRIBUNALS

Membership Application Form

The
(Name of Tribunal)

applies for membership of the Council of Australasian Tribunals (COAT) and declares that it is supportive of the objects of the COAT.

Please include the following details on the Register of Tribunals maintained on the COAT website:-

Name of the Presiding Officer:

Name of the Registrar/CEO:

Postal Address of the Tribunal:

Web Address of the Tribunal:

Telephone No. of the Tribunal:

Fax No. of the Tribunal:

Brief Description of Jurisdiction:
(if more space required, please attach separate sheet)

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Please direct correspondence and other communications relating to COAT to:

Presiding Officer/Nominee:

Email Address:

Alternative Fax No. or Postal Address:
(if other than as above)

Direct Telephone No.:

Signed:

Date: