



ACT
Government

Justice and Community Safety

CHANGE OF REGISTERED OFFICE PARTICULARS – FORM A4

Associations Incorporation Act 1991

Associations Incorporation Regulation 1991

PURPOSE

This form is to be used to change the particulars of an association's registered office, under the *Associations Incorporation Act 1991* (the Act). You can access the legislation at www.legislation.act.gov.au. You may also obtain further information and forms at www.ors.act.gov.au.

PRIVACY

The Act authorises the Registrar-General to collect the personal information required by this form for the purposes of registering an association under Division 3.1 of the Act. The Registrar-General prevents any unreasonable intrusion into a person's privacy in accordance with the *Privacy Act 1988* (C'wlth). The Registrar-General provides identifiable information to law enforcement organisations and authorised organisations that have legal authority to request information under prescribed circumstances.

CONTACT

Office of Regulatory Services Shopfront
255 Canberra Avenue, Fyshwick ACT 2609

Opening Hours 9:00am to 4:30pm Monday to Friday

General Enquiries (02) 6207 3000

Office of Regulatory Services Postal Address
GPO Box 158, Canberra ACT 2601

Website www.ors.act.gov.au Email ors.bil@act.gov.au

Fax Number (02) 6207 0424

INSTRUCTIONS FOR COMPLETION

- Complete this form using a black pen only.
- Please print; ensuring writing is clear and legible.
- This office will not accept lodgement of this form if it is not completed in full.
- Payment can be made by cheque, postal order, credit card (visa or mastercard), cash or eftpos. We are unable to accept credit card payment over the phone or provide invoices for later payment. Where a fee is applicable we cannot process a lodgement unless accompanied by payment. Cheques should be made in favour of the Office of Regulatory Services.
- Please retain your receipt as evidence of payment.

IMPORTANT INFORMATION

- The incorporation of an association creates a legal entity, under the management of the committee members. The committee members are held accountable for ensuring that the association operates in compliance with applicable laws including the Act and the *Associations Incorporation Regulation 1991* (the Regulation).
- The public officer is responsible for acting as a point of contact between the association and the community and is expected to be able to represent the association in dealings with the Office of Regulatory Services.
- The Act prohibits any person from serving as a committee member or the public officer if that person is bankrupt or personally insolvent, unless the ACT Supreme Court grants leave under S 63 of the Act. A search should be conducted of the records held by the Insolvency and Trustee Service Australia (ITSA) before accepting the nomination of a person as a committee member.
- If the association, the public officer or a committee member fails to meet their statutory obligations under the Act (such as failure to lodge annual returns), the Registrar-General may make an application to the ACT Civil and Administrative Tribunal (ACAT) for the disqualification of the office-holder. The disqualification will be for a period the ACAT considers appropriate if satisfied that the extent of noncompliance justifies disqualification.

TRANSLATING AND INTERPRETING SERVICE

If you require further information or require advice, a language assistance service is available by phoning the Translating and Interpreting Service (TIS) on 13 14 50.



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1. ASSOCIATION NAME	ASSOCIATION NUMBER
	A0

2. PARTICULARS OF THE CHANGE		
Has the association not previously had a registered office but has now opened the office?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has the association changed the address and/or hours of opening of its registered office?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has the association closed its existing registered office and will no longer have a registered office?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

3. DATE OF THE CHANGE

4. OFFICE ADDRESS OF REGISTERED OFFICE OF ASSOCIATION	OFFICE HOURS	
	FROM:	TO:
	STATE / TERRITORY	POSTCODE
	ACT	

5. PREFERRED POSTAL ADDRESS OF ASSOCIATION		
	STATE / TERRITORY	POSTCODE

6. NAME AND ADDRESS OF CURRENT PUBLIC OFFICER				
<small>(The public officer must be an ACT resident aged 18 years or older. If you do not want your residential address on the public record, please list an alternative address in the ACT)</small>				
TITLE <i>(Mr, Ms)</i>	GIVEN NAMES	SURNAME		
ADDRESS				
STATE/TERRITORY	POSTCODE	EMAIL ADDRESS	CONTACT TELEPHONE NUMBER	
ACT				

7. STATEMENT BY THE PUBLIC OFFICER	
As the current public officer of this association, I confirm all of the particulars shown on this form are true and correct, and that I have read the 'Privacy Statement' and 'Important Information' as listed on the front page of the form.	
Public Officer Name	Public Officer Signature