

**FLORAL ART SOCIETY OF NEW ZEALAND INC.
AREA SURVEY FORM 2019**

Please Print Clearly with correct information:

NAME OF AREA: _____

AREA REPRESENTATIVE:

ADDRESS: _____

_____ **Postcode** _____

Phone: () _____ **Email:** _____

CHAIRMAN:

ADDRESS: _____

_____ **Postcode** _____

Phone: () _____ **Email:** _____

SECRETARY:

ADDRESS: _____

_____ **Postcode** _____

Phone: () _____ **Email:** _____

TREASURER:

ADDRESS: _____

_____ **Postcode** _____

Phone: () _____ **Email:** _____

AREA WEBSITE CONTACT:

Phone: () _____ **Email:** _____

No. of Clubs/Groups in Area: _____ **No. of Area Meetings per Year** _____

IMMEDIATELY AFTER AREA 2019 AGM please return this form, together with the Area Annual Report, to Marianne Gibson FASNZ Secretary PO Box 167 Matakana 0948.

PLEASE NOTE: Forms returned after 31st March 2019 may be too late to be included in the 2019-2020 Address Book.

By allowing personal information to be submitted on this Survey Form, it is accepted that these members have voluntarily agreed to act as a point of contact for the Area either in the FASNZ Address Book, the FASNZ Diary, or on the FASNZ Website and Facebook page, in the role as shown above.