



CHANGE OF CLUB NAME OR LOGO

PRESCRIBED FORM NRR 02B

FOOTBALL FEDERATION AUSTRALIA

Level 22, 1 Oxford Street, Darlinghurst NSW 2010

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Facsimile: +61 (2) 8020 4100



1. EXISTING CLUB DETAILS

Existing Club Name:	
ACN, ABN, Incorporated Association Number (if applicable):	
Street address of Club:	
Mailing address of Club (if different from above):	
Club email address (see Guidance Note #5):	
Club telephone number (see Guidance Note #6):	
Which District Association/Zone is the Club a member of? (if not a member, please advise e.g. church group, armed forces, direct affiliate to Member Federation etc.):	

2. CLUB PRIMARY CONTACT INFORMATION

Title of Contact Person: Mr Mrs Miss Ms Dr Prof

Name of Contact Person:

Email address of contact person (if different from Question 5 above):

Telephone number of contact person (if different from Question 6 above):

Position within Club (see Guidance Note #12):

3. PROPOSED NEW CLUB NAME OR LOGO

3.1

Proposing to change (tick one box):

Name

Logo

Both

Proposed new Club name (if applicable):

New ACN, ABN, or Incorporated Association Number (if applicable):

3.2 If proposing to change the Club logo, please insert colour images in the sections below of each of the Club's current logo and proposed new logo:

Current Club Logo	Proposed New Club Logo

4. SIGNING

The Club acknowledges and agrees that it is a Club that is registered with Football Federation Australia ("**FFA**"). The Club warrants that the information provided on this Prescribed Form is current and correct and that it will promptly notify the Competition Administrator or Member Federation of any proposed changes. By signing this Form, the Club and its Officials agree to comply with the FFA Statutes, including the National Registration Regulations, the National Disciplinary Regulations, the National Code of Conduct and the Grievance Procedure.

By signing this form, on behalf of the Club I acknowledge that I have read FFA's National Club Identity Policy ("**NCIP**") and declare that to my reasonable knowledge and belief, the proposed new Club name and/or logo complies with the NCIP.

Signature of Club

Primary Contact: _____

Date: _____

5. FOR MEMBER FEDERATION OFFICIAL USE ONLY:

DATE RECEIVED: _____

REVIEWED FOR NCIP PURPOSES: _____

COMPETITION RULES APPROVED: _____

INFORMATION ON FORM VERIFIED AS CORRECT: _____

DETERMINATION (APPROVED/DISAPPROVED) _____

DATE OF DETERMINATION: _____

Guidance Notes for Application for Change of Name or Logo Form

PROCESS

Providing false or misleading information may result in the immediate cancellation of registration.

This form is to be sent to your relevant Member Federation. ***The Member Federation must sight all proposed changes in this form.*** Once the Member Federation has approved the changes and has indicated so in the official section, you will receive confirmation in writing by the Member Federation and the changes will be made to the National Online Registration System (where applicable).

EXISTING CLUB DETAILS

1. Insert the name of your football Club.
2. The registration number of the Club is to be provided e.g. an Incorporated Association attained via the State or Territory Office of Fair Trading.
3. The street address of the Club is to be provided, including Suburb, State and Postcode.
4. If the mailing address of the Club is different to the street address, please provide details.
5. The email address of the Club is to be clearly printed. If the Club does not have an email address, please provide an email address of a Committee Member who will be the contact for any correspondence. Should the Committee Member cease to be involved with the organisation, or the email address has changed, please notify your Member Federation immediately.
6. The contact telephone number of the Club (including area code if landline – e.g. 02 8354 5555) is to be provided. If the Club does not have a general telephone number, please provide an alternative (e.g. the Secretary's telephone number, noting the position of the person whose number has been supplied).
7. Please specify the name of the District Association/ Zone which the Club is affiliated with (e.g. Central Zone, etc.).
8. The name of the Member Federation which is the governing body of football in the Competition Administrator's State or Territory (e.g. Capital Football) is to be provided.

CLUB PRIMARY CONTACT INFORMATION

9. Please print the first and last name of the contact person for the Club.
10. Please provide the email address of the contact person if it is different from the Club email address.
11. Please provide the telephone number of the contact person if it is different from the Club telephone number.
12. Please state the position of the contact person within the Club e.g. Secretary, Treasurer, Committee Member etc.

PROPOSED NEW CLUB NAME OR LOGO

13. Tick the one box which applies depending on whether the Club is proposing to change its name, logo or both.
14. The new name that the Club is proposing to be use is to be provided. Also, the new registration number of the Club (if any) is to be provided e.g. an Incorporated Association attained via the State or Territory Office of Fair Trading.
15. Attach a clear colour image of the Club's current logo in appropriate resolution (if applicable).
16. Attach a clear colour image of the Club proposed new logo in appropriate resolution (if applicable).

SIGNING

The Club Primary Contact must read the declaration and sign and date the form where required. ***THE CLUB WILL NOT BE PERMITTED TO USE A NEW NAME OR LOGO UNLESS APPROVED IN ACCORDANCE WITH THE NCIP.*** A copy of the NCIP is available at <https://www.ffa.com.au/governance/statutes-and-regulations>.