



®

**PHILIPPINES**

**PROBUS CENTRE RECORDS & DIRECTORY UPDATE 2010 – 2011**  
**PLEASE PRINT CLEARLY IN BOLD LETTERING**

FULL CLUB NAME: \_\_\_\_\_

CLUB NUMBER: \_\_\_\_\_

CLUB GENDER (male, female or combined): \_\_\_\_\_

CLUB POSTAL ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTCODE: \_\_\_\_\_

NUMBER OF MEMBERS (include Life & Honorary): \_\_\_\_\_

TIME OF MEETING: \_\_\_\_\_ DAY: \_\_\_\_\_ WEEK: \_\_\_\_\_

MEETING VENUE: \_\_\_\_\_

PRESIDENT (first name & surname): \_\_\_\_\_

TELEPHONE (include area code): \_\_\_\_\_

EMAIL (not for publication in Directory): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTCODE: \_\_\_\_\_

Do you wish your home address to be listed in the Directory? **Yes/No** (Please circle)

SECRETARY (first name & surname): \_\_\_\_\_

TELEPHONE (include area code): \_\_\_\_\_

EMAIL (not for publication in the Directory): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTCODE: \_\_\_\_\_

Do you wish your home address to be listed in the Directory? **Yes/No** (Please circle)

**NOT FOR PUBLICATION IN THE DIRECTORY**

TOURS OFFICER (first name & surname):

\_\_\_\_\_

TELEPHONE NUMBER (include area code): \_\_\_\_\_

EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTCODE: \_\_\_\_\_

**NOT FOR PUBLICATION IN THE DIRECTORY**

**Probus Liaison Officer – Email access required.**

The aim is to have information emailed to the club officer for broadcast to members at club meetings and through the club bulletin/newsletter. It is hoped this method will expedite communications between clubs and PCSP for important announcements or special offers. This access does not affect or usurp the normal communication between the club secretary and PCSP.

PROBUS LIAISON OFFICER (first name & surname):  
(Person other than the Secretary/President)

\_\_\_\_\_

TELEPHONE NUMBER (include area code): \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

This information will be used in accordance with  
Probus Centre – South Pacific Inc. Privacy Policy.

Please complete and return these forms to Probus Centre - South Pacific Inc.  
by 30<sup>th</sup> April 2010.

Probus Centre – South Pacific Inc.  
PO Box 1294  
Parramatta NSW 2124 Australia

# STATISTICAL INFORMATION

Only for use by Probus Centre – South Pacific Inc.  
and Rotary in the development of Probus clubs.

**PLEASE PRINT CLEARLY IN BOLD LETTERING**

FULL CLUB NAME: \_\_\_\_\_ **INC. YES/NO**  
(Please circle)

CLUB NUMBER: \_\_\_\_\_

ROTARY DISTRICT NUMBER:

CLUB GENDER (male, female or combined): \_\_\_\_\_

CLUB WEBSITE (if applicable): \_\_\_\_\_

NAME OF SPONSORING ROTARY CLUB: \_\_\_\_\_

MEMBERSHIP CEILING OF CLUB (if any): \_\_\_\_\_

DOES YOUR CLUB HAVE A WAITING LIST (if so, how many)? \_\_\_\_\_

WHAT IS THE EXPECTED TIMEFRAME FOR A PERSON ON THE WAITING LIST: \_\_\_\_\_

IS THERE A NEED FOR ANOTHER CLUB IN YOUR AREA? **YES** **NO** (Please circle)

WHAT ARE YOUR COSTS?

a) JOINING FEE: \_\_\_\_\_

b) ANNUAL SUBSCRIPTION FEE: \_\_\_\_\_

c) VENUE: \_\_\_\_\_

d) OTHER MEETING COSTS: \_\_\_\_\_

## COMBINED CLUBS ONLY

DOES YOUR CLUB HAVE A GENDER BALANCE? **YES** **NO** (Please circle)

IF SO, WHAT IS THE CURRENT PERCENTAGE BALANCE?

**MALE** %  **FEMALE** %

HAS YOUR CLUB PREVIOUSLY ATTENDED A PROBUS INFORMATION DAY? **YES** **NO** (Please circle)

WOULD YOUR CLUB LIKE AN INFORMATION DAY IN YOUR DISTRICT IN 2010? **YES** **NO** (Please circle)

WOULD YOUR CLUB LIKE SOME ADVICE AND ASSISTANCE WITH: (Please circle)

-	MEMBERSHIP DEVELOPMENT	<b>YES</b>	<b>NO</b>
-	RISK MANAGEMENT	<b>YES</b>	<b>NO</b>
-	COMMITTEE RECRUITMENT	<b>YES</b>	<b>NO</b>
-	PRIVACY	<b>YES</b>	<b>NO</b>
-	ESTABLISHING A SUCCESSION PLAN	<b>YES</b>	<b>NO</b>
-	PCSP OPTIONAL TRAVEL INSURANCE	<b>YES</b>	<b>NO</b>
-	CONSTITUTIONAL MATTERS	<b>YES</b>	<b>NO</b>

DO YOUR MEMBERS HAVE AN INTEREST IN PROBUS RENDEZVOUS? **YES** **NO** (Please circle)

**Thank you for your co-operation in providing this information.**

The information provided on this form shall be used by the  
Probus Centre – South Pacific Inc. in accordance with Privacy legislation.