Meeting attendance record

Site name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start time: \_\_\_\_\_\_\_\_\_\_\_\_\_ End time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total number of members attended: \_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- |
|  | Name (please print) | **Signature** |
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**Meeting organiser: please attach to meeting notes and delegate nomination forms and send to** delegate@psa.org.nz **or post to: PSA, Organising Administrator, PO Box 3817 Wellington, 6140.**