Book Groups Selection Form





Only one book selection form is required to be submitted per group by the nominated group secretary.

Should you require assistance in completing any details please contact Book Groups on (03) 9652 0620.

When completed, please email this form to bookgroups@cae.edu.au.

Alternatively, please print out and post to CAE, Level 2, 253 Flinders Lane, Melbourne 3000

Number of Members:									
Meeting Week:		1 st	2 nd	3	rd	4 th	5^{th}		
Meeting Day:	Mon	Tue	Wed	Thu	Fri	Sat	Sun		
Meeting Time: AM / PM									
Age Range:						***************************************			
Membership:	Fer	nale	М	ale	M	lixed			
Refer New Members?: Yes No									
Office Use Only VIC / INT Date received: Local / Non Local / Remote Meetings: 6 9 11 Processed									

Do not write in Office Use section

GROUP SECRETARY DE	TAILS				
Name:					
Phone: ()	Mobile:				
Email:					
Delivery Address: (if different from Secretary's address)					
Special Delivery Instruct	ions:				

Gro	Group Name: Group Code:						
Pleas	k Selections e choose to receive your books in either: riority order from 1–30 or ☐ randomise	9 meetings - provide	If you're having 11 meetings - provide 30 selections 9 meetings - provide 22 selections 6 meetings - provide 15 selections			Meeting Dates	
1	В	11	В	21	В	Jan	
2	В	12	В	22	В	Feb	
3	В	13	В	23	В	Mar	
4	В	14	В	24	В	Apr May	
5	В	15	В	25	В	Jun	
6	В	16	В	26	В	Jul	
7	В	17	В	27	В	Aug	
8	В	18	В	28	В	Sep	
9	В	19	В	29	В	Oct	
10	В	20	В	30	В	Dec	