***CHANGE OF DELEGATE TO BE COMPLETED VIA OCS UP TO THE CUT OFF POINT OF 5PM MONDAY 7th JANUARY 2019***

***THIS FORM IS ONLY TO BE USED FROM TUESDAY 8th JANUARY 2019***

**EMERGENCY CHANGE OF DELEGATE FORM**

***Delegates may not be changed after the start of conference.***

**Name and address of BRANCH SECRETARY**

Name: …………………………………………………………………………………….

Address: ………………………………………………………………………………….

Region: ……………………………………………………………………………………

Branch Name: ……………………………………………………………………………

Branch Number: ………………………………………………………………………….

Name of Delegate to be changed: ……………………………………………………….

Name of New Delegate: …………………………………………………………………

Membership No of New Delegate: ………………………………………………………

Date of Birth of New Delegate: …………………………………………………………..

Signature of Branch Secretary: …………………………………………………………..

Signature of Branch Chair: ……………………………………………………………….

**please note that all of the above details must be completed before any changes are made. proportionality AND FAIR REPRESENTATION should be maintained at all times.**

The signature of the National Officer will be required as authorisation for the change.

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| I agree that the above change of delegate maintains the proportionality and fair representaion of the delegation.  Signed*:………………………………………………………………….* Date *…..........................................................* |
| National Officer |

***This form must be signed by the National Officer and handed in to the ConferenceD Desk at Crowne Plaza Chester – DO NOT send to National Office.***