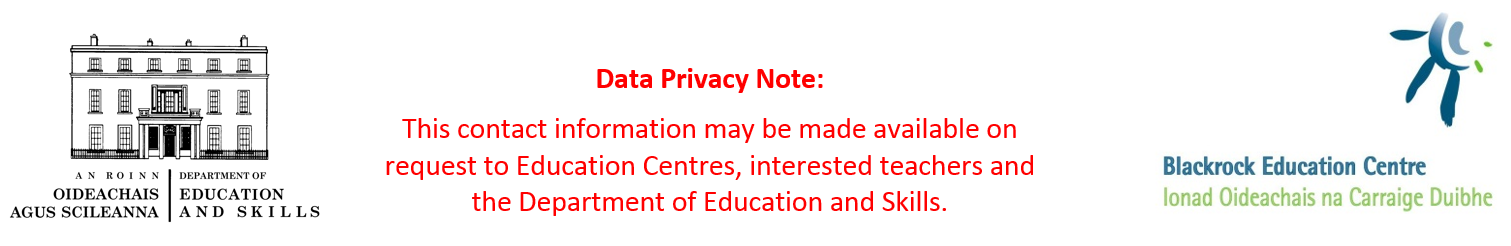


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| TGA full name | |  | | | | | | | | | TGA initials | |  |
| Are you a member of SARG? (Y/N) | | |  | Subject/ Programme | | |  | | | | | | |
| Number of current members | | |  | Website address | | |  | | | | | | |
| Number of Communities of Practice/Branches | | |  | Nominated Education Centre | | |  | | | | | | |
| No of members in the National Executive | | |  | Planned number of YEARLY meetings | | | |  | Date of most recent AGM | | |  | |
|  | **Chairperson** | | | | | **Secretary** | | | | **Treasurer** | | | |
| Name |  | | | | |  | | | |  | | | |
| Email |  | | | | |  | | | |  | | | |
| Teaching Council Number |  | | | | |  | | | |  | | | |
| Designated TPN Contact person  (CPD Coordinator) | | | | |  | | | | | | | | |
| Address | | | | |  | | | | | | | | |
|  | | | | |  | | | | | | | | |
|  | | | | |  | | | | | | | | |
| Telephone | | | | |  | | | | | | | | |
| Mobile | | | | |  | | | | | | | | |
| Email | | | | |  | | | | | | | | |
| Teaching Council Number | | | | |  | | | | | | | | |

**Other National Executive Members:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Position | Email | Teaching Council No. |
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**This form was filled by (*name*) on (*date*)** .