

FORM B

Details for Remembrance Ceremony at the District Convention to be held at Stanthorpe 31st October – 2nd November 2025

Lions Club of:

| | <u>Surname</u> | <u>First Name</u> | <u>Please state whether the Deceased is a Lion, Lion's Partner, Lioness or Leo</u> |
|----|----------------|-------------------|--|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |

I certify that the above details are correct.

Signed: _____ Date: _____

Print Name: _____ Position in Club: _____

PLEASE RETURN THIS FORM: (Please provide a photo of the member as soon as possible)

Due Date: 10th October 2025
Via email: cabsec.Q1@lions.org.au
Via Post: Cabinet Secretary
Christine Cufflin
PO Box 131, Capalaba QLD 4157

A "NIL" ADVICE IS REQUIRED, IF APPROPRIATE