



TRIM Reference: _____

REQUEST FOR FREEDOM OF ENTRY

PERSON REQUESTING FREEDOM OF ENTRY

Title: _____ Surname: _____

Given Names: _____

Australian Military/Civilian Unit: _____

Address: _____

Phone Number: _____ Mobile Number: _____

Email Address: _____

DETAILS OF PREVIOUS FREEDOM OF ENTRY *If Applicable*

DETAILS OF FREEDOM OF ENTRY FUNCTION

Please describe the following:

- Details of the Australian Military/Civilian Unit's association with the City of Greater Geraldton.
- Proceedings for the Freedom of Entry event and streets to be marched in the City of Greater Geraldton.
- Required date and time for the event.
- Support information may be attached to this application.

DETAILS OF REFEREES

Person/s who are able to make direct comments in this request:

REFEREE ONE

Title: _____ Surname: _____

Given Names: _____

Community Organisation: _____

Address: _____

Phone Number: _____ Mobile Number: _____

Email Address: _____

REFEREE TWO

Title: _____ Surname: _____

Given Names: _____

Community Organisation: _____

Address: _____

Phone Number: _____ Mobile Number: _____

Email Address: _____

ADDITIONAL INFORMATION