

APPLICATION FOR HRA REPORTS/DATA

Please complete this Application Form and submit your request to your State Controlling Body.

Once authorised, email the form and any relevant attachments to HRA at hra@hra.com.au

Upon receipt by HRA, the request will be reviewed and you will be notified if/when the information can be provided.

Please note: Fees may apply in some circumstances. Should fees apply, you will be notified prior to the preparation of the requested report/data.

APPLICANT and REPORT/DATA DETAILS (please complete all fields)

Applicant Name:			
Association/Club Name (if any):			
	Position:		
Daytime Contact:	Mobile/Phone:		
	Email:		
Report Description:	<i>Please include a detailed description of information required:</i>		
Reason for Request:			
Will this data be shared with any other person or third party?		Yes:	No:
If yes, please provide details:			

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Signature:		Date:	
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Authorisation by State Controlling Body

I have reviewed the above request for HRA data and authorise it be forwarded to HRA for consideration.

State Controlling Body:			
Name:			
Signature:			
Position:		Date:	