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**ROYAL NAVAL
ASSOCIATION**

The Branch Secretary's Guide Annexes

**Revised
March 2017**



**Annex A: APPLICATION FOR LIFE MEMBERSHIP OF
THE ROYAL NAVAL ASSOCIATION Bye-Law 6(i)**

Branch:		
Full Name of Nominee		
Length of RNA Service		
Branch comment: (Post(s) held)		
Area comment: (Post(s) held)		
Reason for Award:		
Recommended at Branch General Meeting held on:	<i>(Date)</i>	
Number of Members present and entitled to vote:	Number For	Number against
Branch Chairman's Comments: The nominee received/did not receive 2/3rds of the votes of those present and entitled to vote.		

Declaration: I certify that the nominee is qualified by service for Full Life Membership i.e. a minimum of ten years i.a.w. Bye-Law 6(i).

Signed:Branch Chairman.

National Council Member's Comments:

I certify that the nominee is qualified by service for Full Life Membership i.e. a minimum of ten years i.a.w. Bye-Law 6 (i). **APPROVED / NOT SUPPORTED**

NCM No (Area):	<i>(Date)</i>
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Annex B: CERTIFICATE OF APPRECIATION: FULL, ASSOCIATE AND HONORARY MEMBERS

Guidance Notes and Application Procedure.

Background: At the 2015 Conference a motion was approved that Associate members awarded a Certificate of Appreciation might henceforth exercise voting rights equal to a full member of their own Branch.

To qualify for an award, the recipient should meet the requirements of the following definition:

“A Full, Associate or Honorary Member who has given long and honorable service to the Association. Such service may have been given nationally, to an Area or Branch or RNA Registered Club and should have significantly enhanced the reputation of the Association. The quality of service is more important than its length which should however reflect a sustained effort on behalf of the Association”.

Procedure for Recommendation: An Area or Branch wishing to consider a recommendation should do so formally at a meeting of the Area/Branch Committee and the decision should be recorded in the Minutes (Note: *Unlike the recommendation for Life Membership for a Full Member, it does not require the endorsement of an Area or Branch General Meeting as stated in the Bye Laws*).

Recommendations should be sent to both the General Secretary at Central Office and the National Council member for the Area, stating the following:

- Full name of the member recommended
- Whether an Associate or Honorary member and period(s) of membership
- The exceptional services met as defined above.

The National Council member will inform Central Office if the recommendation is approved.

Subject to this recommendation, the General Secretary will **approve the award** and report it to the next meeting of the Council

If the award is not supported by the National Council member, the recommendation will be considered by the Council at their next meeting.

Recommendations should be accompanied by a remittance for £25 (as at 2017) as a contribution to the cost of the Certificate, the administration actions needed and supply of the relevant lapel badges. Annual subscriptions will continue to apply.

For Overseas Branches: A copy of the recommendation is to be sent to the National Council Overseas Corresponding Representative who will inform Central office if the recommendation is supported.

Subject to this recommendation, the General Secretary will **approve the award** and report it to the next meeting of the Council.

If the award is not supported by the National Council Overseas Corresponding Representative, the recommendation will be considered by the Council at their next meeting.

Award of the Certificate: The Certificate of Appreciation will be forwarded to the Area/Branch making the recommendation for completion and signature by the appropriate Area/Branch officials. It should be presented in a manner which they consider appropriate.



**Annex C: APPLICATION FOR THE AWARD OF A
CERTIFICATE OF APPRECIATION Bye-Law 6(j)**

Branch/Area:		
Full Name of Nominee:		
Full, Associate or Honorary:		
Period of Membership:		
Describe the exceptional services required to merit this award:		
Signature: (Chairman)		
NCM's Comments:		
Delete as appropriate:	APPROVED	NOT SUPPORTED
Signature:		
NCM No: Area	Date	



ROYAL NAVAL ASSOCIATION

Annex D: Branch Office Holders Information (for 20..)

BRANCH.....		AREA	
CHAIRMAN	Name:		
	Address:		
			Post Code.....
	Tel / Mobile:	e-mail:	
VICE-CHAIRMAN	Name:		
	Address:		
			Post Code.....
	Tel / Mobile:	e-mail:	
HON. SECRETARY	Name:		
	Address:		
			Post Code.....
	Tel / Mobile:	e-mail:	
HON. TREASURER	Name:		
	Address:		
			Post Code.....
	Tel / Mobile:	e-mail:	
HON. WELFARE OFFICER	Name:		
	Address:		
			Post Code.....
	Tel / Mobile:	e-mail:	
HON. SOCIAL SECRETARY	Name:		
	Address:		
			Post Code.....
	Tel / Mobile:	e-mail:	

Name & Address of Branch Meeting Place:

Frequency of Branch Meetings:

Note: This Report (RNA Form 1) and one copy of the Annual Accounts (RNA Form 2) should be forwarded to the Council at Central Office, with a copy direct to the Area Secretary, within 31 days after the Branch AGM but no later than 30 April 2017.

If any of your Branch Office Holders change throughout the year, please send an update to Central Office and Area Secretary.

Signature of Hon. Secretary **Date**



Annex E: Branch Annual Membership return and application form (for 20..)

BRANCH					Area			
Return cards to NAME & ADDRESS								
	Post Code					TEL / E-MAIL:		
RENEWAL for Existing Members					<i>New Member's requiring stickers and Membership Card</i>			
Surname Initials	LIFE	FULL	ASSOC	Change of address (please tick)		<i>Full</i>	<i>Assoc</i>	<i>Address, Post Code, phone No, e mail</i>
<i>Example</i>		*						
<i>Example</i>						*		
