SAMPLE PETITION

This form is designed to help you prepare the front page of a petition. Subsequent pages need to include only the 'request' of the petition, with names and signatures below it.

For more information contact the Petitions Committee

petitions.committee.reps@aph.gov.au or by phone (02) 6277 2152

TO THE HONOURABLE THE SPEAKER AND MEMBERS OF THE HOUSE OF REPRESENTATIVES	ADDRESS Petitions must be addressed to the House of Representatives
This petition of	Here insert words describing who the petition is from, e.g. 'Certain citizens of Australia'
draws to the attention of the House: We therefore ask the House to:	REASON This must be a matter on which the House has power to act - a Commonwealth legislative or administrative matter
PRINCIPAL PETITIONER	REQUEST Note: the address, reason and the request together comprise the 'terms' of the petition and together must not exceed 250 words
Name: Signature:	
Address:	CONTACT DETAILS for
Email (if available): Postcode: _	PRINCIPAL PETITIONER This information is only for the use of the Petitions Committee. It will not be published
	This information is only for the use of the Petitions Committee. It will not be
Email (if available): Telephone: NAME AND SIGNATURE	This information is only for the use of the Petitions Committee. It will not be
Email (if available): Telephone: NAME AND SIGNATURE 1. 2. 3.	This information is only for the use of the Petitions Committee. It will not be published SIGNATURES OF
Email (if available): Telephone: NAME AND SIGNATURE 1. 2. 3. 4.	This information is only for the use of the Petitions Committee. It will not be published SIGNATURES OF OTHER PETITIONERS • If required, attach additional pages for signatures • The request must
Email (if available): Telephone: NAME AND SIGNATURE 1. 2. 3. 4. 5.	This information is only for the use of the Petitions Committee. It will not be published SIGNATURES OF OTHER PETITIONERS • If required, attach additional pages for signatures • The request must appear at the top of each additional page
Email (if available): Telephone: NAME AND SIGNATURE 1. 2. 3. 4. 5. 6.	This information is only for the use of the Petitions Committee. It will not be published SIGNATURES OF OTHER PETITIONERS If required, attach additional pages for signatures The request must appear at the top of each additional page Other information such as postal addresses
Email (if available): Telephone: NAME AND SIGNATURE 1. 2. 3. 4. 5. 6. 7.	This information is only for the use of the Petitions Committee. It will not be published SIGNATURES OF OTHER PETITIONERS If required, attach additional pages for signatures The request must appear at the top of each additional page Other information such as postal addresses may also be provided Signatures on the
Email (if available): Telephone: NAME AND SIGNATURE 1. 2. 3. 4. 5. 6. 7. 8.	This information is only for the use of the Petitions Committee. It will not be published SIGNATURES OF OTHER PETITIONERS If required, attach additional pages for signatures The request must appear at the top of each additional page Other information such as postal addresses may also be provided Signatures on the reverse of a petition, or on a blank page,
Email (if available): Telephone: NAME AND SIGNATURE 1. 2. 3. 4. 5. 6. 7. 8. 9.	This information is only for the use of the Petitions Committee. It will not be published SIGNATURES OF OTHER PETITIONERS If required, attach additional pages for signatures The request must appear at the top of each additional page Other information such as postal addresses may also be provided Signatures on the reverse of a petition,
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