

**SOUTH YORKSHIRE FEDERATION OF WOMEN'S INSTITUTES**

**ANNUAL REPORT FORM**

**FOR \_\_\_\_\_ WI**

**TO BE COMPLETED AND RETURNED IMMEDIATELY AFTER THE WI ANNUAL MEETING TO THE FEDERATION OFFICE**

1. Name of WI \_\_\_\_\_ 2. Date of Financial Year End \_\_\_\_\_

3. Membership at 1 February: This year \_\_\_\_\_ Last year \_\_\_\_\_  
New members enrolled during the year from 2 February to date of Annual Meeting \_\_\_\_\_  
Number on the waiting list, if any. \_\_\_\_\_

4. Monthly meetings (average attendance) \_\_\_\_\_ How many meetings held (WI rule VIII) \_\_\_\_\_

5. Committee Meetings: Was there an election for committee? \_\_\_\_\_ Number of members on committee \_\_\_\_\_  
Number of meetings held \_\_\_\_\_ What sub-committees do you have? \_\_\_\_\_

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6. Has your WI passed any bye-laws or changed any Decisions during the year? If so give details: \_\_\_\_\_

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7. How many of your members are individual subscribers to News 'N Views? \_\_\_\_\_

8. Have you had a visit from one of the Trustees, WI Advisers or sub-committee member during the last year? \_\_\_\_\_  
If yes please give details: \_\_\_\_\_

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9. How many of your members have attended courses at Denman during the past year? \_\_\_\_\_  
Please give details \_\_\_\_\_  
\_\_\_\_\_

Do you grant a Bursary and/or offer help towards the expenses of members attending such courses? \_\_\_\_\_

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10. National and Federation meetings. Note: Delegates' expenses must be paid out of WI funds.  
Did you send a Delegate to:  
The NFWI Annual Meeting? \_\_\_\_\_  
The Federation Annual Meeting? \_\_\_\_\_  
Any other Federation or NFWI events? \_\_\_\_\_  
Have any of your members attended any Federation or NFWI events in a non-delegate capacity? If so please give details.  
\_\_\_\_\_

**FOR THE COMING YEAR**

**Name of WI** \_\_\_\_\_

(Please enclose your new programme and your annual financial statement, unless already sent by Federation IFE)

**Monthly meetings:**

DAY \_\_\_\_\_ WEEK IN MONTH \_\_\_\_\_ TIME \_\_\_\_\_

MONTH IN WHICH ANNUAL MEETING IS HELD \_\_\_\_\_ VENUE \_\_\_\_\_

ADDRESS \_\_\_\_\_

POST CODE \_\_\_\_\_ CONTACT TEL: NO: (including code) \_\_\_\_\_

**Committee meetings:**

DAY \_\_\_\_\_ WEEK IN MONTH \_\_\_\_\_ TIME \_\_\_\_\_

PLACE \_\_\_\_\_

**PRESIDENT for the coming year**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

POST CODE \_\_\_\_\_ CODE & TEL: \_\_\_\_\_ EMAIL \_\_\_\_\_

**SECRETARY for the coming year**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

POST CODE \_\_\_\_\_ CODE & TEL: \_\_\_\_\_ EMAIL \_\_\_\_\_

**TREASURER for the coming year**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

POST CODE \_\_\_\_\_ CODE & TEL: \_\_\_\_\_ EMAIL \_\_\_\_\_

**MCS REPRESENTATIVE for the coming year**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

POST CODE \_\_\_\_\_ CODE & TEL: \_\_\_\_\_ EMAIL \_\_\_\_\_

**Signed** \_\_\_\_\_ **President** for the past year (date) \_\_\_\_\_

**Signed** \_\_\_\_\_ **Secretary** for the past year (date) \_\_\_\_\_