Nomination Form – Annual General Meeting

[Service Name]

**NOMINATION FORM FOR ELECTION TO THE COMMITTEE OF MANAGEMENT**

|  |
| --- |
| Completed nomination forms must reach the: |
| Secretary: |  | By: |  | [insert date] |
| I,  |  | accept nomination to the position of: |
|  | (print full name) |  |
|[ ]  President |[ ]  Treasurer |
|[ ]  Vice-president |[ ]  General committee memebers |
|[ ]  Secretary |[ ]  [Specify other] |
| Signed: |  | Date: |  |
|  | Nominee |  |  |
| Proposer: |  |
|  | (Print full name) |  |
| Signed: |  | Date |  |
|  |  |  |  |
| I am aware that in order to fulfil the responsibilities for this role, I may be required to provide a current criminal history check and/or Working with Children Check. |
| Signed: |  | Date: |  |
| Contact phone number:  |  |