



Board of Directors Nomination Form

AGM Date: _____ Location: _____

Nominee Information

Full Name: _____

Phone: _____

Address: _____

Email: _____

Position (check one): President Vice President Secretary Treasurer Director-at-Large

Eligibility (initial): Member: ____ Resident: ____ Willing to serve: ____

Nominee Statement

Nominator Name: _____ Contact: _____

Seconder Name: _____ Contact: _____

Signatures

Nominee: _____ Date: _____

Nominator: _____ Date: _____

Seconder: _____ Date: _____