



NOMINATION FORM

2023 Election of Officers

Nominee's Details

Name:		
Postal Address:		
Email:		
Club Affiliation (if any)		Membership Number:
Telephone:	Preferred:	Alternate:

I confirm:

- I am seeking election as Board Member / Director
- I have attached to this nomination a Resume as required.

I am standing as an independent

I am standing as a member club nominee (must complete the below)

Signature:

Date:

Endorsement: Each nomination must be signed by two (2) financial members of the nominating club.

We the undersigned nominate _____ for the position of

Board Member / Director

Proposer One

Proposer Two

Signed:

Signed:

Club / Position:

Club / Position:

NOMINATIONS MUST BE RECEIVED NO LATER THAN 5.00pm Sunday 20th August 2023
Return completed nomination to: matt.williams@lifesaving.org.nz or SLSNR, PO Box 2195
Auckland, New Zealand

Privacy Act Information - By submitting this form you are: Consenting to Surf Life Saving Northern Region using these details for the purpose of administering the operations of Surf Life Saving Northern Region Inc and acknowledging your right to access, and if necessary correct this information in accordance with the Privacy Act 1993 and subsequent amendments.