

2024 MANAGEMENT COMMITTEE NOMINATION FORM

NAME:			
POSITION: *			
NOMINATED BY:			
	Name	Signature	Date
SECONDED BY:			
	Name	Signature	Date
I declare that:	I live within 35km by road of the Narooma Post Office		
(Tick relevant box)			
	OR: I live outside 35km by road from Narooma Post Office		
	I am a financial member of the Narooma School of Arts and Soldiers' War Memorial Hall Inc.		
	Agree to uphold the Objectives, Constitution and Policies of the Narooma School of Arts and Soldiers' War Memorial Hall Inc.		
Signature of the nominee		Date	

Nomination forms must be submitted to the secretary at least 7 days prior to the Annual General Meeting.

Date received by the Secretary _____

*Positions: President, Vice President, Secretary, Treasurer, Management Committee Member (minimum of 3, maximum of 6)