

NOMINATION FORM COMMITTEE MEMBER 2024-25

We _____
(Club)

Wish to nominate

(Name)

(Address)

_____ (Suburb) _____ (Post code)

Ph: _____ (Home) _____ (Work) _____ (Mob)

Email: _____

❖ As an Executive Office Bearer

(Position)

❖ As an Ordinary Member
(Tick relevant box)

Signed: _____
President

Secretary _____

*** **

I agree to this nomination being submitted.

(Signature of nominee)

(Date)

Nomination forms must be submitted via email to admin@lyvna.com.au by Saturday 26th October 2024.

Resume of nominee:

(Resume not required for current council members)



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