

## Archery ACT Society Inc. Committee Office Bearer – Nomination Form – Rule 25

| In accordance with Rule 25.1 of the | ne constitution I,                  |                          |                   |
|-------------------------------------|-------------------------------------|--------------------------|-------------------|
|                                     | First Name                          | Surname                  |                   |
| of                                  |                                     |                          |                   |
| Street Address                      |                                     | Suburb                   | Postcode          |
| Phone Numbers: (h)                  | (m)                                 | AA no:                   |                   |
| being a financial member of Arch    | ery ACT Society Inc. do hereby nomi | nate for the position of |                   |
| President                           | □ Treasurer                         | Coaching Co              | oordinator        |
| □ Vice President                    | Recorder                            | □ Youth Coord            | dinator           |
| □ Secretary/Public Officer          | Webmaster/Publicity                 | □ Judges/Offic           | cials Coordinator |
| Each position                       | nominated for is to be on a congrat | a nomination form        |                   |

Each position nominated for is to be on a separate nomination form. Place an  $\boxtimes$  in the box to the left of the position you are nominating for

I understand that the position will involve a term of office that will be for a period of 1 year. If successful in my nomination and election to the position, I agree to be bound to any rules or by laws that may govern the conduct and responsibilities of the position.

I confirm that I meet the requirements of the constitution and I am eligible to hold the office nominated.

Nominee:

| Signature | Date |
|-----------|------|
| -         |      |

Proposer:

| First Name               | Surname | AA number |          |
|--------------------------|---------|-----------|----------|
| Street Address           |         | Suburb    | Postcode |
| Signature                |         | Date      |          |
| CT Society Inc. Use Only |         |           |          |