



Cammeray Croquet Club Inc.

ABN 81 393 374 879

NOMINATION FORM

Please return this form to the Secretary at least 7 days before the AGM

POSITION: (Please circle the applicable position)

PRESIDENT

VICE PRESIDENT

TREASURER

SECRETARY

COMMITTEE MEMBER (six positions)

Name of nominee: _____

Name of proposer: _____

.....

Signature of Proposer

Name of Seconder: _____

.....

Signature of Seconder

I consent to my being nominated

.....

Signature of nominee