

Men's Netball New South Wales

Committee nomination form

Nominee details	Name			
	Address			
	Phone			
	Email:			
Committee position (please indicate which position(s) you are nominating for)	President		Vice president	N/A
	Treasurer		Secretary	N/A
	Public officer		Ordinary committee member	
Reasons for nominating				
(if more space if needed please include as an attachment)				
Member endorsement	Member 1		Member 2	
for nomination	Member 1		Member 2	
	Member 1 Signature of member		Member 2	
for nomination (In order for your nomination to be valid it needs to be endorsed by 2				
for nomination (In order for your nomination to be valid it needs to be endorsed by 2	Signature of member		Signature of member	
for nomination (In order for your nomination to be valid it needs to be endorsed by 2	Signature of member	letters) se the nominee for	Signature of member	minee for
for nomination (In order for your nomination to be valid it needs to be endorsed by 2	Signature of member Name of member (block By signing this form I endors	letters) se the nominee for	Signature of member Name of member (block letters) By signing this form I endorse the no	minee for
for nomination (In order for your nomination to be valid it needs to be endorsed by 2	Signature of member Name of member (block By signing this form I endors	letters) se the nominee for	Signature of member Name of member (block letters) By signing this form I endorse the no	minee for
for nomination (In order for your nomination to be valid it needs to be endorsed by 2 current members of MNNSW)	Signature of member Name of member (block By signing this form I endors the committee position(s) in	letters) se the nominee for	Signature of member Name of member (block letters) By signing this form I endorse the not the committee position(s) indicated	minee for
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for nomination (In order for your nomination to be valid it needs to be endorsed by 2 current members of MNNSW)	Signature of member Name of member (block By signing this form I endors the committee position(s) in Signature of member By signing this form I confirm	letters) se the nominee for ndicated above. m that I am eligible to	Signature of member Name of member (block letters) By signing this form I endorse the not the committee position(s) indicated Date	minee for above.