

NSW Masters Squash Association

COMMITTEE NOMINATION FORM

To: The Secretary, NSW Masters Squash Association

Proposer:

I, _____ being a financial member of the NSW Masters Squash Association,

nominate _____

as _____ in accordance with the Constitution.
(Position title)

Signed: _____ Date: _____
(Signature of Proposer)

Secunder:

I, _____ being a financial member of the NSW Masters Squash Association,
(Name of Secunder)

second the nomination of

_____ as _____
(Name of Nominee) (Position title)

Signed: _____ Date: _____
(Signature of Secunder)

Nominee:

I, _____ being a financial member of the NSW Masters Squash Association,
(Name of Nominee)

consent to the above nomination.

I confirm that I am a current financial member of NSWMSA (type "Y")

Date: _____

To Return this Form

Save this file to your laptop (click *File* and then *Save as...*)

Email it as an attachment to secretary@nswmsa.com

Secretary NSWMSA

Dianne Elliott
Convener Tournament Sub Committee
NSW Masters Squash Association

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