

Masters Swimming NSW Board

Nomination Form

NSW Association of AUSSI Masters Swimming Clubs Inc (t/a Masters Swimming NSW)

| We hereby nominate: |
|---|
| as a candidate for the position of |
| at the Annual General Meeting of the Association for the year |
| Proposer: name |
| signature date |
| Seconder: name |
| signature date date |
| Note: Both the Proposer and Seconder must be registered members of a Member club of the Association. Unless the candidate has previously served as a Board member, you must attach a summary of the candidate's background and experience, signed by the candidate. |
| Candidate's consent: |
| If elected, I consent to serve in the above capacity |
| signature date |
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Closing date for nominations is close of business at least 4 weeks prior to the scheduled date of the Annual General Meeting

Nominations are to be sent by hand, post, or email to the address below.

To contact Masters Swimming NSW Phone: 02 8736 1232

Email: <u>admin@mastersswimmingnsw.org.au</u> Internet: <u>www.mastersswimmingnsw.org.au</u>

Postal address: PO Box 6941 SILVERWATER NSW 2128 Sports House, Quad 1, Level 2, 8 Parkview Drive, Sydney Olympic Park