

Nomination Valid: YES / NO

Maroochydore Eagles Basketball Association Inc. Trading as Suncoast Clippers

ABN: 49 050 240 630

Elizabeth Daniels Way, Buderim QLD 4556 PO Box 5557, Maroochydore QLD 4558



## Maroochydore Eagles Basketball Association Inc.

## Management Committee Position Nomination Form 2017-18

Meeting Title: Date: Meeting Venue:	Annual General Meeting Wednesday, 13 <sup>th</sup> December 2017 @ 7pm Suncoast Clippers Basketball Stadium – Clippe	ers Club Room
I hereby nominate	(Print name of Candic	
To the position of Offic (mark appropriate box	cer of the Maroochydore Eagles Basketball Asso	
<ul> <li>Association Vie</li> <li>Board Member</li> </ul>	cretary – 2 year term ce President – 2 year term r – 2 year term r – 2 year term	
I am nominating this ir	ndividual for the following reasons:	
		e to abide by the Maroochydore Eagles Basketball nember of the Association.
Candidate Consent Sig	nature:	Date://2017
Member Nomination S	Signature:	Date://2017
Member Seconder Sig	nature:	Date://2017
If any person on this n	omination form is found to be not financial the	nomination will be declared invalid.
Office use only:		

Manager Signature:	Date:		/2017
	. Bute	,	2017