Nomination Form for Board of Director Position



I	, who is a current WBI	member, nominate	
(Name of nomin	ee)		
	for the	e position of:	
(Name of candid	•		
	□ 2 Year Term		
	□ 1 Year Term		
	□ 2 Year Term		
	□ 2 Year Term		
Officer	□ 2 Year Term		
For reasons			
being:			
	ttributes the candidate can offer this position)		••••
. , ,	, ,		
Signed		Date: /	/
(Signature of No			
	, who is a current	WBI member, second the nomi	nation.
(Print name)			
Signed		Date: /	′ /
(Signature of 2 nd		,	•
1	hereby give my consent to be nor	minated for the nosition of:	
(Print name of co			position)
	nt working with children check: YES / NO	*I have a current pol	•
Thave a carre	THE WORKING WITH CHILDREN TEST NO	i nave a current poi	ice check. TES / NO.
Signed		Date: /	′ /
(Signature of car	ndidate)		

Nominations must be delivered or emailed to the secretary not less than 7 days before the date fixed for the holding of the AGM 2019 AGM Wednesday 29rd May. Nominations due no later than 5pm on the 22ndMay, 2019

Secretary email: president@wbi.org.au AND secretary@wangarattabasketball.org.au