

Lithgow District Chamber of Commerce



NOMINATION FORM

Election of Office Bearers and Committee Members of the Lithgow District Chamber of Commerce

We, _____ and

[must be current members]

wish to nominate _____
[name of candidate]

for the position of [please tick desired position]

- | | |
|--|--|
| <input type="checkbox"/> President | <input type="checkbox"/> Vice President |
| <input type="checkbox"/> Secretary | <input type="checkbox"/> Treasurer |
| <input type="checkbox"/> Member of Committee | <input type="checkbox"/> Member of Committee |
| <input type="checkbox"/> Member of Committee | |

Signature of Proposer 1: _____

Name Please Print: _____

Signature of Proposer 2: _____

Name Please print: _____

Consent of Candidate

I, _____ am willing to take on this role if I am elected to this position at the Annual General Meeting of the Chamber.

Signature of candidate: _____

Date: _____

Please submit a short biography outlining why you wish to stand, your skills &/experience and a photo, All candidates information will be uploaded to the web page.