

FPWA Sexual Health Services Board Nomination Form



Nominations are called for the position of Member of the Board

(Please note that you cannot nominate a person to be an Officer Bearer: the Board elects Office Bearers)

Nominations must be proposed and seconded by financial members of the Association. The person being nominated must either sign the nomination form or the person being nominated must separately indicate in writing their willingness to be nominated.

Nominations should reach the offices of the Association by the close of business on **Friday, 22nd October 2010** and should be addressed to:

**The Chief Executive Officer
70 Roe Street,
Northbridge WA 6865**

Nomination Form

This nomination is for _____

For the position of FPWA Board Member, they are a financial Member of the Association.

I agree to be nominated for this position.

Signature of nominated person _____

Dated this _____ day of _____ 20 _____

Nominated by (signature)

Name (please print)

Seconded by (signature)

Name (please print)