



The Greater Sydney Tenpin Bowling Association Ltd
Trading as **TENPIN SYDNEY**
ABN 36 001 821 147

NOMINATION FORM

I, _____ (please print)

hereby nominate

_____ (please print)

for the position of

* _____

- * **SHOW:**
- | | |
|----------------|--|
| President | Chairperson, East Coast Cup Committee |
| Vice President | Chairperson, Inter- District Committee |
| Secretary | Chairperson, Junior Committee |
| Treasurer | Chairperson, Tournament Committee |
| | Board Member |

	<u>PRINT NAME</u>	<u>SIGNATURE</u>	<u>MEMBERSHIP NO.</u>
<u>NOMINATOR</u>			
<u>SECONDER</u>			
<u>NOMINEE</u>			

NOTE:

THIS FORM MUST BE RECEIVED AT THE ASSOCIATION'S MAILBOX OR BY THE SECRETARY, NO LATER THAN SUNDAY 1st OF MARCH 2020 (14 DAYS PRIOR TO THE AGM). IF THIS CLOSING DATE IS NOT MET THE NOMINATION WILL BE DECLARED INVALID.

Postal Address:
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ST MARYS NSW 1790
Web Address:
www.tenpinsydney.com.au