

THE ROYAL LIFE SAVING SOCIETY OF AUSTRALIA

PF1

SOUTH AUSTRALIA BRANCH INC.

NOMINATION FORM FOR

ELECTION OF OFFICER

POSITION:

NOMINEE'S FULL NAME AND ADDRESS:

.....

.....

Telephone.....(W).....(H) POST CODE:

WE HEREBY NOMINATE THE ABOVE MEMBER FOR THE POSITION INDICATED

PROPOSER [Name]

[Address]

.....

[Signature]

.....

SECONDER- [Name]

[Address]

.....

[Signature]

.....

I ACCEPT THE ABOVE NOMINATION:

[Candidate's Signature]

.....

N.B. Nominee, Proposer, and Secunder, are required [by the Rules] to be financial members of the Branch.

Date:

N.B. The onus is upon the Proposer and/or the Nominee to personally check with the Honorary Secretary, prior to the closing date for the nominations, to ascertain if the nomination has been received by the Executive Officer.

Please send all completed forms to mail@royallifesavingsa.com.au by 31 September 2023