**Nomination Form – Election To Board Of Directors**

**2019 AGM**

*Please type in the spaces provided*

|  |  |  |
| --- | --- | --- |
| Name |  | |
| Address |  | |
| e-mail |  | |
| Mobile No. |  | |
| Current positions held with:   1. A School 2. A Sporting Organisation 3. A Club | |  |

I hereby nominate for the role of Director on the North West Junior Soccer Association Board.

My nomination is for Director. However, should I have a preference for one of the three specific roles below; I will indicate that preference by selecting the box next to that role:

Registrar Treasurer Secretary

Signature…………………………………………… Date ………………………

Please complete and send to:

NWJSA

P.O. Box 2387

Port Adelaide

SA 5015

Or e-mail a copy to:

[nwjsachairperson@gmail.com](mailto:nwjsachairperson@gmail.com)

Nominations are to be received by NWJSA no later than 5pm August 12th 2019.