

Nomination Form - Deaf Action (New Zealand) Committee

Closes 5pm Friday 10th September 2021

To the Secretary,

I _____ wish to be nominated for:

Chairperson
(1 vacancy)

Treasurer
(1 vacancy)

Committee
(3 x vacancies)

(Please select which position you wish to be nominated for)

Secunder: _____

Each position carries a term of 2 years.

Election method - Secret ballot at AGM, Votes can be given by proxy.

Email to Secretary info@deafaction.org.nz