

MEMBER BODY DELEGATE NOMINATION & AUTHORISATION FORM

Member Body Information			
Member Body			
Name *			
Postal Address *			
Suburb *	State *	Post Code *	

Member Body Delegate Information		
Nominated		
Member Body		
Delegate Name *		
Role at Member		
Body *		
Phone *	Email Address *	

* Denotes compulsory fields

I the undersigned as an authorised representative of the Member Body (Member Body) detailed above hereby appoint on behalf of the Member Body, the Member Body Delegate (Delegate) detailed above and authorise the Delegate to make decisions and vote at the Annual General Meeting to be held 20 April 2021 on behalf of the Member Body.

Authorised Representative of a Member Body may be the President, Vice President, Secretary or Treasurer or as otherwise appropriately delegated by the Member Body.

Name: ______ Witness Name: ______

Signature: ______ Signature: _____

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Date: _____ Date: _____

MEMBER BODY DELEGATE NOMINATION & AUTHORISATION FORM CLOSE 5.00pm Thursday 15 April 2021 Via the email or mail details on the previous page.