



Connecting the business community on the Plateau

BOARD NOMINATION FORM FOR ELECTION OF BOARD MEMBERS

We, being financial members of Alstonville Wollongbar Chamber of Commerce, hereby nominate:

NAME:

(please print)

BUSINESS NAME:

CONTACT DETAILS

Address:

Telephone:

Email:

As a member of the Board of Management of the Alstonville Wollongbar Chamber of Commerce this nomination form has been accepted.

NAME: _____ SIGNATURE: _____ DATE: _____

NAME: _____ SIGNATURE: _____ DATE: _____

Completed Nomination Forms are to be forwarded to PO Box 697, Alstonville or emailed in info@alstonvillewollongbar.com.au