

SE Multiple Birth Association Inc.

Registered Association: A 4629

Committee Member Candidate

Nomination Form

In accordance with the

South Eastern Multiple Birth Association Rules of Incorporation.

This form must be used for Committee Member Candidate Nominations for the Annual General Meeting.

Nominations must be received by the club Secretary **no later than 7 days prior** to the annual general Meeting.

We hereby nominate _____ for

the position of _____

Nominated by: _____ Signed _____

Seconded by: _____ Signed _____

Consent of Candidate

I hereby advise the Secretary of my consent to this nomination.

Candidates Name: _____ Signed _____

Date: ____ / ____ / ____

SE Multiple Birth Association Inc Inc.

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APPOINTMENT OF PROXY

In accordance with the

South Eastern Multiple Birth Association Inc Rules of Incorporation.

I,

of.....

hereby appoint.....

of.....

being a Member of the South Eastern Multiple Birth Association as my proxy to vote for me on my behalf at the general meeting of the South Eastern Multiple Birth Association (annual general meeting or special general meeting, as the case may be) to be held on theday of..... the year and at any adjournment of that meeting.

(1) My proxy is authorised to vote in favour of/against (delete as appropriate) the resolution (insert details).

And/Or (delete as appropriate)

(2) My proxy is authorised to vote for all resolutions as my proxy may decide at the meeting.

Signed.....

The.....day of.....the year