



NOMINATION FOR LIFE MEMBERSHIP

DETAILS OF NOMINEE:-

NAME:

ADDRESS:

.....

PHONE: HOME:WORK:MOBILE:

EMAIL:

DISTRICT ASSOCIATION:.....

DETAILS OF NOMINATOR: -

NAME:

ADDRESS:

POSITION WITHIN DISTRICT ASSOCIATION:.....

PHONE: HOME:WORK:MOBILE:.....

EMAIL:

SIGNATURE:

DATE:

DETAILS OF SECONDER:-

NAME:

ADDRESS:

.....

POSITION WITHIN DISTRICT ASSOCIATION:

PHONE: HOME:WORK:MOBILE

EMAIL:

SIGNATURE:

DATE:

N.B. This form is to be used for a Life Membership nomination only. Nominations must be received by the due date and must be accompanied by a Personal Profile Form.

Please return this form to: **Redcliffe Leagues Association Secretary**

THIS FORM MUST BE ACCOMPANIED BY THE PERSONAL PROFILE FORM.



PERSONAL PROFILE (LIFE MEMBERSHIP)

SURNAME

GIVEN NAMES

RESIDENTIAL ADDRESS

POSTAL ADDRESS

POSTCODE

PHONE **HOME**

BUSINESS

MOBILE

EMAIL

DATE OF BIRTH **MAIDEN NAME**
(where applicable)

PLACE OF BIRTH **BIRTH COUNTRY**

OCCUPATION

EMPLOYER

DISTRICT ASSOCIATION.....

DATE

SERVICE TO REDCLIFFE LEAGUES SOFTBALL ASSOCIATION INC