



NOMINATION FORM FOR A POSITION ON THE TBAWA BOARD

I hereby nominate:

Name

(must be a current TBAWA member)

for the position of:

.....

Nominator (must be an authorised representative of a Centre Association or Board member and complete the statement in support of the nomination on page 2.)

(Name)

**Nominator
(Signature)**

I hereby accept the above nomination:

Name

Signature

Date

Nominations are called for:

- **President** – 2 year Term
- **Treasurer** – 2 year Term
- **VP Adult & Senior Services** – 1 year term
- **Executive Assistant** – 1 year term

