



LINCOLNSHIRE WOLDS WOODTURNING ASSOCIATION

COMMITTEE NOMINATION FORM

I, the undersigned, being a Member of **LWWA**, hereby nominate for appointment as a member of the club Committee for the position of:

<input type="checkbox"/>	Chairman	<input type="checkbox"/>	Secretary	<input type="checkbox"/>	Membership Secretary	<input type="checkbox"/>	General Committee
<input type="checkbox"/>	Vice Chairman	<input type="checkbox"/>	Treasurer	<input type="checkbox"/>	Program Secretary	<input type="checkbox"/>	

(place a cross in relevant box)

Name of NOMINEE:

Mr/Mrs/Miss/Ms:	
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Club Membership Number:	
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Phone:		E.Mail	
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Name of NOMINATOR	
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Club Membership Number	
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Signature of Nominator		Date	
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DECLARATION OF NOMINEE:

I,	Being
being Member of LWWA agree to stand for election as a member of the Committee for the position of	

Signature of Nominee:		Date	
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PLEASE NOTE: ANY NOMINATION WILL BE INVALID IF ALL PERSONS NAMED HERE ARE NOT CURRENT FINANCIAL MEMBERS OF THE CLUB.

Nominations close at 5.00 PM on: 5th January 2019

Email Nominations to: The Secretary
Email: abuckle22@me.com