



Australasian Team Roping Association
15/429 Peel Street
TAMWORTH, NSW 2340
Ph: 0488 471 069
Email: admin@teamroper.com.au

NOMINATION FORM

NOMINATIONS CLOSE: Monday 18th September, 2017 (being 7 days prior to the Annual General Meeting as per the ATRA Constitution)

Completed Nomination forms to be sent or emailed to:
The Returning Officer, 15/429 Peel Street, Tamworth NSW 2340
Email: admin@teamroper.com.au

This form must be completed in every detail to be accepted

I,
(Full name of Person Nominating the Candidate)

ATRA Membership Number: being a financial Full or Life member of the Australasian Team Roping Association, hereby nominate;

Mr Mrs Ms Miss (Circle appropriate)

.....
(Full Name of Candidate)

Of Postcode.....
(Residential Address)

ATRA Membership Number: being a financial Full or Life member of the Australasian Team Roping Association and is not an employee of the Association.

For election as a Director to the Australasian Team Roping Association Board. (Please tick one)

- President
- Secretary
- Treasurer
- Ordinary Board Member

Signature of Nominator

I,
(Full name of Person Seconding the Nominating)

ATRA Membership Number: being a financial Full or Life member of the Australasian Team Roping Association, hereby second the nomination;

Signature of Secunder

I, hereby consent to the above nomination.
(Full Name of Candidate)

Signature of Candidate

ELECTION OF DIRECTORS 2017