

## NOMINATION FORM STATE EXECUTIVE COMMITTEE

1			of		
(Name of Member)				(Name of Club)	
Being a full member for the	past	twelve months wo	ould like to nor	ninate:	
(Name of Nominee)					
For the position of Presiden	t / Vi	ce President / Secr	etary / Treasu	rer (Please circle choice)	
Signed1st Member			Seconded		
			<del></del>	2 <sup>nd</sup> Member	
Dated / /					
		NOMINEE DE	CLARATION		
I am not/have not been:	1)	An undischarged bankrupt or my affairs are being managed under insolvency laws			
		Convicted of an offence in connection with the promotion, formation or management of a body corporate			
		Convicted of an offence involving fraud or dishonesty punishable on conviction by three months or more imprisonment			
	4)			Division 3 (the duties of officers uty with respect to incurring of	
Signature of Nominee:					
By signing this declaration,	the	nominee accepts th	he nominatior	and conditions stipulated.	

Please return the signed form by email to Secretary - **secretarydartlegendswa@gmail.com**By 9<sup>th</sup> November 2024