

SOUTHERN PENINSULA BASKETBALL ASSOCIATION BOARD NOMINATION FORM

	•
l,	_ of (address)
seek to be nominated for the position of Boa	rd Member.
NOMINATOR 1	
l,	(nominator name) as an eligible
	(nominee name) for the
position of Board Member.	
Signature of Nominator:	Date:
NOMINATOR 2	
l,	(nominator name) as an eligible
member of SPBA hereby nominateposition of Board Member.	(nominee name) for the
Signature of Nominator:	Date:
ACCEPTANCE OF NOMINEE I, (name of no	ominee) agree to accept the above nomination
Signature of Nominee:	Date:
Contact Number of Nominee:	
Email Address of Nominee:	
Return to: SPBA General Manager: gm@sthpen.com.au no la Please also supply a cover letter with a maximum nominate for a Board of Management position.	ater than 7.00pm on Monday 30 th November 2020. of 200 words outlining why you would like to