



NZPFU

NOMINATION FORM

IMPORTANT: All information must be legible

PROPOSER:

I _____ of the _____ Local
(Surname) (Forenames)

Of the N.Z. Professional Firefighters Union hereby nominate the person named below for position of _____ of the NZPFU.

Signed:..... Date:.....

SECONDER:

I _____ of the _____ Local
(Surname) (Forenames)

Of the N.Z. Professional Firefighters Union hereby Second the nomination of the person named below for position of _____ of the NZPFU.

Signed:..... Date:.....

PERSON NOMINATED:

FULL NAME: _____

HOME ADDRESS: _____

I agree to accept the nomination for the position of _____
_____ of the NZPFU.

Signed:..... Date:.....

Note: Proposers and Seconders must be financial members of the Union.