



NOMINATION FORM

IMPORTANT: The Nominee, Proposers and Seconders must be financial members of the New Zealand Professional Firefighters' Union. All information must be legible and complete.

PROPOSER:

I _____
(Surname) (Full Forenames)

of the _____ Local of the NZPFU hereby nominate the person named below
for the position of _____ of the NZPFU.

Signed:..... Dated:.....

SECONDER:

I _____
(Surname) (Full Forenames)

of the _____ Local of the NZPFU hereby Second the nomination of the
person named below for position of _____ of the
NZPFU.

Signed:..... Dated:.....

PERSON NOMINATED:

I _____
(Surname) (Full Forenames)

DATE OF BIRTH: _____ CURRENT OCCUPATION: _____

HOME ADDRESS: _____

By signing this form I accept the nomination for the position of _____
and confirm I have read and am agreeing to abide by the NZPFU Charter.

Signed:..... Dated:.....