



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 the position of _____ of the N.Z. Professional Firefighters Union.

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 the position of _____ of the N.Z. Professional Firefighters Union.

Signed..... Date.....

PERSON NOMINATED:

Full Name: _____

Home Address: _____

I agree to accept the nomination for the position of _____ of the N.Z. Professional Firefighters Union.

Signed..... Date.....

Note: The Proposer, Seconder and Nominee must all be financial members of the Union at the time of nomination