



## 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:.....

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**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:.....

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**PERSON NOMINATED:**

**FULL NAME:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

I agree to accept the nomination for the position of \_\_\_\_\_

\_\_\_\_\_ of the NZPFU. By signing this I have read and I am agreeing  
to abide by the NZPFU Charter

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

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