

ACN 001 535 502

NOMINATION FORM 2019

Position as Director of The Australian Ceramics Association (TACA) Board

Nominee Name:				
	Please print	t name in BLOCK LETT	ERS	
I hereby nomina	te for the position a	as Director of TACA ar	nd agree to sign accordingly.	
Date:	Phone:	Signature: _	Signature:	
Nominated by:				
	Please print	t name in BLOCK LETT	ERS	
	Signature o	f nominator:	Phone:	
Seconded by:				
	Please print	t name in BLOCK LETT	ERS	
	Signature o	f seconder:	Phone:	

NOMINATION FORMS MUST BE RECEIVED AT TACA OFFICE <u>NO LATER THAN</u> 5PM (AEST) FRIDAY 13 SEPTEMBER 2019.

Post: The Australian Ceramics Association, PO Box 677, Alexandria NSW 1435

Fax: 02 8072 1804

Email: mail@australianceramics.com

NOTE:

- * All nominees, nominators and seconders must be current members of The Australian Ceramics Association.
- * All nomination forms must contain the names and signatures of the nominee, nominator and seconder.
- * Forms will not be accepted if not complete.

The Australian Ceramics Association, PO Box 677 Alexandria NSW 1435 Square One Studios, 32 Bowden St, Alexandria NSW 2015

T: 1300 720 124; F: 02 8072 1804 E: mail@australianceramics.com