

SHOW HORSE COUNCIL OF VICTORIA INC

NOMINATION FORM

NOMINATIONS FOR THE SHCV COMMITTEE AND EXECUTIVE CLOSE ON THURSDAY 22ND OCTOBER 2020 @ 4PM. THIS FORM MUST BE RETURNED TO THE SOCIETY SECRETARY BY MAIL, PO BOX 1185, MORNINGTON 3931 OR EMAIL TO : admin@shcv.com.au

The Nominee and Nominators must be at least 17 years of age and have paid all moneys due and payable to the Association by the general meeting at which members of the Executive Committee are to be elected.

Membership Forms available from the Secretary. Please use block letters to fill out the form.

I, BEING A MEMBER OF THE SHOW HORSE COUNCIL OF VICTORIA, HEREBY NOMINATE

.....

FOR THE POSITION(S) OF.....

FOR THE ENSUING TWO YEAR'S.

SIGNED:.....DATE:.....

(Signature of Proposer)

I, BEING A MEMBER OF THE SHOW HORSE COUNCIL OF VICTORIA, HEREBY SECOND THE ABOVE NOMINATION(S)

SIGNED:.....DATE:.....

(Signature of Seconder)

I, BEING A MEMBER OF THE SHOW HORSE COUNCIL OF VICTORIA, HEREBY ACCEPT THE ABOVE NOMINATION(S)

SIGNED:.....DATE:.....

(Signature of Nominee)

I have read and understand the Rules of the Show Horse Council of Victoria Inc.

Signed :

(Rules can be found on the SHCV website under "Rules and Regulations")

NB: If necessary, nominations for Committee Positions will also be called for "from the floor" at the AGM

Nominee to MUST attach a copy of their current "Working With Children Check