



NOMINATION FORM - ANNUAL GENERAL MEETING

Name of person nominated: _____

Home Address: _____

Work address: _____

Ph: _____

Ph: _____

Email: _____

Email: _____

Nominated by: _____

I hereby accept this nomination: (signature) _____

Date of nomination: _____

NOMINATED POSITION * *Please tick one box*

President Vice-President

Secretary Treasurer

Publicity Officer Executive Committee

** Please note all nominees must be either an individual member for at least one year or a teacher at a Member school .*

Please return this form by close of business one week prior to AGM to The Secretary at email marineandaquaticteachers@gmail.com or/and mtaqexecutive@gmail.com