



ELECTION TO BOARD NOMINATION FORM

Name of Nominee:

Position:

Tel No:

Email:

Nominated by:

HV ID:

Tel No:

Email:

I confirm I have gained the nominee's consent for their name and details to go forward.

Signed:

Date:

Please return to: communications.werribeehc@outlook.com by 30 October 2020

Please note that this nomination will be invalid
unless this form has been fully completed.