

# Wollongong Motorcycle Club Inc.

## Committee Nomination Form

To the Secretary of the Wollongong Motorcycle Club:  
P.O. Box 401, Figtree NSW 2525  
Phone: 4271 8336

I \_\_\_\_\_, being a financial member of the  
Wollongong Motor Cycle Club, nominate \_\_\_\_\_ (full name  
of nominee), for the position of \_\_\_\_\_ (state position), on the  
committee of the Wollongong Motor Cycle Club for the 2018 Season.

Signed \_\_\_\_\_ (proposer) on this \_\_\_\_\_ day of \_\_\_\_\_ 2017.

I \_\_\_\_\_, being a financial member of the  
Wollongong Motor Cycle Club, second the above nomination.

Signed \_\_\_\_\_ (seconder) on this \_\_\_\_\_ day of \_\_\_\_\_ 2017.

I \_\_\_\_\_, (full name of nominee), being a financial  
member of the Wollongong Motor Cycle Club, accept the nomination for the above position.

Signed \_\_\_\_\_ (nominee) on this \_\_\_\_\_ day of \_\_\_\_\_ 2017.

### Note:

All nominees & nominators must have been a financial member for a minimum of 12 months.  
**Nominations must be received by close of business, Friday 10th November 2017.**