



Western Australian Retirement Villages Residents Association Inc

NOMINATION FORM FOR ELECTION TO COUNCIL

TO BE COMPLETED BY THE MEMBER NOMINATING THE CANDIDATE

I, being a member of the Association
(print name of nominator)

of
(print name of village and locality)

Email phone

hereby nominate for the position of:
(print name of candidate)

President Vice President Secretary Treasurer Council Member
(please circle the appropriate position)

Signed by me: Date

TO BE COMPLETED BY THE MEMBER SECONDING THE NOMINATION

I, being a member of the Association
(print name of seconder)

of
(print name of village and locality)

Email phone

hereby second the nomination.

Signed by me: Date

TO BE COMPLETED BY THE CANDIDATE

I, being a member of the Association
(printed name of nominee/candidate)

of
(name of village and locality)

Email phone

I declare that:

- I understand *the Objects and Purposes of the Association*
- I meet all the eligibility requirements to hold a position on Council as per rules 10.4 – 10.6
- if elected, I will perform the designated duties to the best of my ability.

Signed by me: Date

As an attachment to this Nomination, the Candidate is requested to provide the following information which will be made available to each WARVRA member to assist in their decision making for elections.

In a CV of no more than 130 words please advise your occupations prior to retirement, the length of time you have lived in a Retirement Village and a summary of your participation in your village or local community.