

**ASSOCIATION COMMITTEE NOMINATION FORM**

Nomination for the nominated Association Committee for one year term of office (please tick).

**□ Cruising □ Fishing\* □ Social**

I being a financial Member of the CYCSA propose and

I being a financial Member of the CYCSA hereby second

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (nominee)

for the position of Committee Member for the nominated Association for a one-year term of office.

Signed: Proposer Date

 Seconder Date

I the person nominated above hereby accept the nomination

Signed Date

**\* Please note that in the case of the Fishing Association Committee, all nominees are required to be a financial member of the Fishing Association.**

# NOMINATIONS CLOSE 5:00 PM 3RD AUGUST 2023WITH THE GENERAL MANAGER