

NSW APIARISTS' ASSOCIATION INC.

ABN: 89 417 216 326

2025 NOMINATION FORM - EXECUTIVE COUNCIL

NOMINEE (Person you are nominating)	
Name:(please insert nominee name)	Member No:(insert nominee member number)
I hereby accept this nomination.	
Signed:(to be signed by nominee)	Date
NOMINATOR	
l	Member No:
(please print your name)	(insert your membership number)
hereby nominate the person listed above as the Nomin Inc. Executive Council.	ee for a position on the NSW Apiarists' Association
Signed:	Date
SECONDER	
Name:(please insert your name)	Member No:(insert your membership number)
hereby second the nomination of the person listed above Association Inc. Executive Council.	e as the Nominee for a position on the NSW Apiarists'
Signed:	Date
No Member of the Association shall be eligible for elec-	tion to the Executive Council unless they reside in NSW or

- No Member of the Association shall be eligible for election to the Executive Council unless they reside in NSW or the ACT and has been a Financial Member for at least two successive years immediately prior to the date of the holding of the Annual Conference at which Nominations for election are received
- Each member shall be elected for a 2-year term and must retire from office at the Annual Conference held at the end of such 2-year term, but if eligible, may seek reappointment.

Return:

By post to: Secretary/Treasurer, NSW Apiarists' Association, PO Box 226 Crookwell NSW 2583 Or email to: info@nswaa.com.au

This form must be received by NSWAA no later than 5pm, 1 May 2025