



**ONTARIO RINGETTE ASSOCIATION
NOMINATION FORM**



NOMINATION FOR DIRECTOR-AT-LARGE

NAME: _____

ADDRESS: _____

TELEPHONE: Res: () _____ Bus: () _____

NOMINEE ACCEPTANCE: _____
Signature Date

In order to accept this nomination, this form must be accompanied by a short resume outlining background and experience related to the position appointed for.

NOMINATED BY

a) NOMINATING COMMITTEE 1) _____
Signature of Chair

OR

b) CHARTER MEMBERS 1) _____ _____
Region Signature of Chair

OR

2) _____ _____
Region Signature of Chair

c) REGISTERED MEMBERS 1) _____ _____
Association Signature of President

2) _____ _____
Association Signature of President

3) _____ _____
Association Signature of President

***Nominations will be accepted 15 days prior to the Annual General Meeting
Revised October, 2008**