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Nomination Form – Committee of Management

I _____

Position _____

Of _____ (Name of Council)

Which is a current financial member council of the Australian Coastal Councils Association Inc. for 2016-17 hereby nominate:

Name _____

Position _____

Of _____ (Name of Council)

For election to the Association's Committee of Management to represent:

State **NSW (Casual vacancy)** _____

Signed _____

Date _____

Please note – The period of appointment is to the date of the Association's Annual General Meeting in 2017, which is to be held in the period from July to November 2017. All positions for State representatives on the Committee of Management will be declared vacant at the 2017 AGM.

Please return this nomination form by COB **Monday 21 November 2016** to:

email: info@coastalcouncils.org.au