



Elected Director Prescribed Nomination Form

The following individual is nominated for election to the position of Director of Polocrosse Australia Limited:

Full name of nominee:	
Member number (if applicable):	
Address:	
Phone:	
Fax:	
Email:	

The nomination must be signed by a Member State or a Member State Representative

Name of Member State Representative	Address	Signature	Date

NOMINEES PLEASE NOTE – extract from Polocrosse Australia Constitution 14.4 (b)

Nominees for Elected Director (including the Chair) positions on the Board must declare any position they hold in a Member State, including as office bearer, director, Representative or paid appointee. If the nominee is elected, they must resign from any such position in the Member State within 2 months of being elected to the Board.

Please list any positions you currently hold.

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CERTIFICATION OF NOMINEE

I **agree** to be nominated for the position of Director of Polocrosse Australia Limited. If elected will undertake the duties of the position in accordance with the Constitution and the Corporations Act.

Attached is a copy of my curriculum vitae (CV) outlining my skills and experience relevant to the Position Description - Polocrosse Australia Limited Director.

I am a financial member of Polocrosse Australia Limited (please tick box to confirm)

Signature of nominee:	Date

This form must be completed and received by the National Executive Officer by close of business AEST 9 April 2022.

The National Executive Officer
Polocrosse Australia Limited
Email: neo@polocrosse.org.au