

NEW SOUTH WALES DARTS

NOMINATION FORM FOR EXECUTIVE

I/We the undersigned, being financial members of New South Wales Darts, wish to nominate

_____ as Chairperson/Administrator/Treasurer for New South Wales Darts.

I/We desire the said nominee to contest the Ballot as being a Representative of the Active Member of Zone _____.

Signature of Proposer: _____ NSW Darts Membership No. _____

Signature of Seconder: _____ NSW Darts Membership No. _____

I, _____ being a financial member of New South Wales Darts hereby certify that I am eligible and will stand for the position of Chairperson / Administrator / Treasurer of New South Wales Darts. I hereby certify I have been on the Board of Directors for a minimum period of two (2) years.

Signature of Nominee: _____ NSW Darts Membership No. _____

Received by the President: Date: _____ Time: _____

I hereby certify that this nomination is in accordance with the Memorandum and Articles of Association of New South Wales Darts.

Signature of President: _____