

NOMINATION FORM

INDEPENDENT BOARD MEMBER 2020

<u>NAME</u>	
Name in full:	
Phone number	/s:
Email:	
Occupation:	
Signed:	
	ndicate which meeting times you would be available for if selected: Daytime (business hours) Evening
	Both daytime and evening
lmportant:	PLEASE ENCLOSE A COVERING LETTER SUMMARISING YOUR BUSINESS / BOWLS EXPERIENCE FOR SUBMISSION TO THE APPOINTMENTS PANEL.
REFEREES:	
1. Name:	
Email:	
Phone number	/s:
2. Name:	
Email:	/s:
IMPORTANT NOT	E: Please return by Friday 15 th May 2020 to:
	Auckland Bowls Inc
	PO Box 74 077 Greenlane
	Auckland 1546

or email to steven.yates@aucklandbowls.co.nz