

Nomination Form for Office Bearers – Midland Zone PCV

*To be returned to the MZ Secretary 15 days prior to date of AGM. midland-zone@live.com.au

President

Nominated Name:

Signed on Behalf of

Pony Club

District Commissioner:

Date:

Secretary:

Date:

I, the undersigned accept the nomination for election to the office of President.

Signed:

Date:

Senior Vice President

Nominated Name:

Signed on Behalf of

Pony Club

District Commissioner:

Date:

Secretary:

Date:

I, the undersigned accept the nomination for election to the office of Senior Vice President.

Signed:

Date:

Junior Vice President

Nominated Name:

Signed on Behalf of

Pony Club

District Commissioner:

Date:

Secretary:

Date:

I, the undersigned accept the nomination for election to the office of Junior Vice President.

Signed:

Date:

Secretary

Nominated Name:

Signed on Behalf of

Pony Club

District Commissioner:

Date:

Secretary:

Date:

I, the undersigned accept the nomination for election to the office of Secretary.

Signed:

Date:

Treasurer

Nomination Name:

Signed on Behalf of

Pony Club

District Commissioner:

Date:

Secretary:

Date:

I, the undersigned accept the nomination for election to the office of Treasurer.

Signed:

Date:

Nomination Form for Office Bearers – Midland Zone PCV

*To be returned to the MZ Secretary 15 days prior to date of AGM. midland-zone@live.com.au

Examining Secretary

Nomination Name:

Signed on Behalf of

Pony Club

District Commissioner:

Date:

Secretary:

Date:

I, the undersigned accept the nomination for election to the office of Examining Secretary.

Signed:

Date:

Event Secretary

Nomination Name:

Signed on Behalf of

Pony Club

District Commissioner:

Date:

Secretary:

Date:

I, the undersigned accept the nomination for election to the office of Event Secretary.

Signed:

Date:

State Representative (2 year term)

Nomination Name:

Signed on Behalf of

Pony Club

District Commissioner:

Date:

Secretary:

Date:

I, the undersigned accept the nomination for election to the office of State Representative.

Signed:

Date: