



Australian Bowhunters Association Inc. Southern New South Wales and ACT Branch



Branch Executive Committee Nomination Form Treasurer

We hereby nominate:
Full name of nominee

for the position of: **ABA Southern NSW & ACT Branch – Treasurer.**

Proposed by:
Full name Signature ABA No

Seconded by:
Full name Signature ABA No

Club
Endorsement:
Full name of Club President or Executive Officer Signature ABA No

All signatories must be financial members of ABA.

I accept the above nomination, declare all information on this form to be accurate, and acknowledge that I meet the listed prerequisites for this position.

.....
Full name of Nominee Signature ABA No Date

Prerequisites for this position as defined by Section 8.3.5 ABA Constitution

- Must be eligible to be an officeholder under the Act.
- Has continuously remained a member of the company for at least the preceding two years.
- Has not had their membership of the company terminated or suspended within the preceding five years.