

Merritt and District Minor Hockey Association PO Box 936, Merritt, BC V1K 1B8 Email: info@merrittminorhockey.com www.merrittminorhockey.com

BOARD OF DIRECTORS NOMINATION

| Naminator | | | | | | |
|---|--|----------|-------------|-----------|-------------|--|
| Nominator Surname: | | Given: | | Initial: | | |
| Surfidille: | | Given: | | Illicial: | | |
| | | | | | | |
| | | | | | | |
| Nominee | | | | | | |
| Surname: | | Given: | | Initial: | | |
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| | | | | | | |
| T the above named nominator, herby | le above named nominee, as a candidate f | | or ele | action or | | |
| appointment to the Merritt and District Minor Hockey Association Board of Directors and I confirm the nominee has | | | | | | |
| authorized me to nominate them for election or appointment to the Merritt and District Minor Hockey Association | | | | | | |
| Board of Directors | | | | | | |
| Signature | | | Date | | | |
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| | | | | | | |
| Candidate | | | | | | |
| Surname: | | Given: | | Initial: | | |
| | | | | | | |
| | | | | | | |
| Physical Address | | | | <u> </u> | | |
| Number and Street | | City | Province | | Postal Code | |
| Number and Street | | City | FIOVILLE | | Fostal Code | |
| | | | | | | |
| | | | | | | |
| Mailing Address (if different from above) | | | | | | |
| Number and Street | | City | Province Po | | Postal Code | |
| | | | | | | |
| | | | | | | |
| Telephone Numbers | | | | | | |
| Home Business | | | Cellular | | | |
| | | | | | | |
| | | | | | | |
| Email Addresses | | | | | | |
| Home | Business | Other | | | | |
| | | | | | | |
| | | | | | | |
| Dy signing this nomination form and submitting it to the Mauritt and District Miner Healer, Association (AMMIA) Y | | | | | | |
| By signing this nomination form and submitting it to the Merritt and District Minor Hockey Association (MMHA), I confirm (initial boxes): | | | | | | |
| | | | | | | |
| I accept the nomination and am willing to serve as a Director on the MMHA Board of Directors, or in the case | | | | | | |
| I am not elected or appointed to the Board of Directors, I am willing to serve as a Senior Manager; | | | | | | |
| Town qualified to come as a Diverton on Conion Manager in accordance with the MMIIA bulgary and the | | | | | | |
| I am qualified to serve as a Director or Senior Manager in accordance with the MMHA bylaws and the Societies Act (SBC 2015); | | | | | | |
| Societies Act (SBC 2015); | | | | | | |
| I have declared any potential conflicts of interest that may be created by my election or appointment to the | | | | | | |
| MMHA Board of Directors or as a Senior Manager. | | | | | | |
| | | | | | | |
| Signature | | | Date | | | |
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| | | | <u>I</u> | | | |
| Nomination Committee Review | | | Date: | | | |
| | | | | | | |
| ACCEPTED | | REJECTED | | | | |
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