



Nominator: _____
(Name of nominating Person)

Hereby nominates the person below for the following position:

- President (2-year term)
- Secretary (2-year term)
- Director (1-year term)

Nominee: _____

Address: _____

Cell Phone: _____

E-Mail: _____

I hereby signify my acceptance of the nomination and declare my willingness to serve.

Nominee:

Signature of the Nominator

Date

Signature of the Nominee

Date

Please send completed form to president@qcmbl.ca & secretary@qcmbl.ca by no later than **7:00pm local time (Regina time) on Tuesday December 6th, 2022**. Any nomination forms received after 7:00pm on the 6th will not be accepted.