



NOMINATION FORM

Please complete and sign.

(Completed forms can be scanned and send by e mail to: secretary@manx.net or posted to:
Secretary SftD, 36 Laurel Avenue, Onchan, IM3 3JF)

Positions vacant: Chairman, Vice Chairman, Hon Treasurer, Hon Secretary, and Committee Member

I agree to be nominated to serve as a member of the Executive Committee of Sailing for the Disabled for the year 2018-2019 and would be willing to accept one of the positions listed above.

Date _____ Signature _____

I _____ (name)

Wish to stand for _____ (position)

Address _____

Post Code _____ E mail _____

Tel no _____

Proposed by

Name _____

Address _____

Post Code _____

E mail _____ Tel no _____

Signature _____

Seconded By

Name _____

Address _____

Post Code _____

E mail _____ Tel no _____

Signature _____