



## **NOMINATION FORM 2025 AGM**

Name of Nominee:	
Position Nominated For:	
Membership Type:	
Employer:	
Phone Number	
Email:	

### **Nomination By**

I \_\_\_\_\_, nominate \_\_\_\_\_ for the position of \_\_\_\_\_. I certify that I am a Regular or Associate 1 member of the Association in good standing.

Signature: \_\_\_\_\_, signed at \_\_\_\_\_, on \_\_\_\_\_.  
Name Location Date

### **Nomination Seconded By**

I \_\_\_\_\_, second the nomination of \_\_\_\_\_ for the position of \_\_\_\_\_. I certify that I am a Regular or Associate 1 member of the Association in good standing.

Signature: \_\_\_\_\_, signed at \_\_\_\_\_, on \_\_\_\_\_.  
Name Location Date

### **Nomination Accepted By**

I \_\_\_\_\_, accept the nomination for the above position.

Signature: \_\_\_\_\_, signed at \_\_\_\_\_, on \_\_\_\_\_.  
Name Location Date

Please email the completed nomination form to [info@boabc.org](mailto:info@boabc.org) no later than **July 18, 2025, at 3:00 PM.**