

Phone - 02 9517 2577 Fax - 02 9517 2488 Post - P O Box 854, Newtown, NSW 2042 203/1 Erskineville Rd, Newtown, NSW, 2042 Email - info@scarletalliance.org.au Web - www.scarletalliance.org.au

Nomination Form for Elected Positions at Scarlet Alliance

We nominate	
[name of nominee]	
For [position/s nominated for]	
<u>1st Nominator</u> (Scarlet Alliance Member)	<u>2nd Nominator</u> (Scarlet Alliance Member)
NI .	
Name:	Name:
Signatura	Signature:
Signature:	Jigilature
I accept the nomination:	
[Name of Nominee]	
Signature of Nominee: Date:	

Nomination Form Updated 27 January 2016