

NZCF NOMINATION FORM

I,	(name)	
Nominate		
	(name)	
For the position of (please cross out wh	nat does not apply)	
Executive Council Member		
Breed Section Representative (Bree	ed)	
Signature of Nominator		
NZCF Membership numberMer	mber of (Club)	_
Dated/2019		
Seconded by((name) Signature	
NZCF Membership number Mem	ber ofClub	
Dated/2019		
I accept the nomination shown abo	ove	
(Signature)		
NZCF Membership number Mem	nber ofClub	
Dated/2019		

Post to: S José, EC Secretary, C/- 34 Second Ave, RD 3 Te Aroha 3393

OR Email: secretary@nzcf.com