



TENNIS WEST DIRECTORS NOMINATION FORM

I, _____, being a Registered User of _____
[Name of Tennis Club]

hereby nominate: _____
[Name of Nominee]

For the position of Director of Tennis West in accordance with Article 12.3 of the Constitution.

Signature of Nominator: _____

Dated this: _____ day of _____ 2019

Secunder Name: _____, being a Registered User of

[Name of Tennis Club]

Signature : _____

Dated this: _____ day of _____ 2019

I hereby consent to the above nomination:

_____ (Signature of Nominee) Date: _____

I have attached the following documents in support of this nomination:

- CV of Nominee
- Nominee's Suitability Against Criteria

Nominations close at 5:00pm on Friday, 6 September 2019 and must be returned to:

Tennis West
PO Box 116
BURSWOOD WA 6100
mroberts@tennis.com.au

<u>OFFICE USE ONLY</u>
Date Received:
SIGNED: