



THE CHILDREN'S BOOK COUNCIL OF AUSTRALIA - WA BRANCH (Inc.)

NOMINATION FORM – BRANCH EXECUTIVE POSITION 2017

Please note all nominations must be received by the Branch Secretary prior to the commencement of the meeting and NO nominations will be accepted from the floor of the meeting

Nominations due Monday 3rd April 2017.

Please forward to either: wa@cbca.org.au or PO Box 473 WEST PERTH 6872

I wish to nominate for the position of _____ on the **Branch Executive**

Name: _____

Address (Home): _____

Telephone: (Home) _____ (Mobile): _____

Email: _____

Signature _____

Nominated by _____

(must be a Member of the CBCA WA Branch)

Nominator's Signature _____ Date _____



THE CHILDREN'S BOOK COUNCIL OF AUSTRALIA - WA BRANCH (Inc.)

NOMINATION FORM – COMMITTEE MEMBER 2017

Please note all nominations must be received by the Branch Secretary prior to the commencement of the meeting and NO nominations will be accepted from the floor of the meeting

Nominations due Monday 3rd April 2017.

Please forward to either: wa@cbca.org.au or PO Box 473 WEST PERTH 6872

I wish to nominate for the position of **WA Branch Committee Member**

Name: _____

Address (Home): _____

Telephone: (Home) _____ (Mobile): _____

Email: _____

Signature _____

Nominated by: _____

(must be a Member of the CBCA WA Branch)

Nominator's Signature: _____ Date _____