

# NOMINATION FORM

## QUEENSLIFF SURF LIFESAVING CLUB

I hereby nominate for one (or more) of the following roles of the QSLSC Board, Queenscliff Surf Lifesaving Club:

Role: \_\_\_\_\_

Role: \_\_\_\_\_

Role: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**In have read and understand obligations of members of the QSLSC Board and the role of the position(s) I am nominating for.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return this form to:

The Secretary, Queenscliff Surf Lifesaving Club by Friday 5th July 2019:

Via Email: [secretary@queensliffslsc.org.au](mailto:secretary@queensliffslsc.org.au)

Or by Post: PO Box 98, Manly NSW 1655