



CLUB WILLOUGHBY

Willoughby Legion Ex-Services Club Ltd

**Willoughby Legion Ex-Services Club Ltd
Nomination Form for the position of DIRECTOR**

**NOMINATIONS MUST BE LODGED TO THE CLUB
26 Crabbes Avenue North Willoughby NSW 2068
Or
Email kreeve@clubwilloughby.com.au**

Except for signatures, please ensure that all details are printed legibly.

I, (full name) -----

Of (full residential address) -----

Contact Numbers: (Home) ----- Mobile) -----

Email address: ----- Club Membership Number: -----

HEREBY NOMINATE TO STAND FOR ELECTION AS A DIRECTOR OF THE CLUB.

WE HEREBY PROPOSE AND SECOND THE ABOVE NOMINEE FOR THE POSITION AS A DIRECTOR OF THE CLUB

PROPOSED by full name) -----

Of (full residential address) -----

Contact Numbers: (Home) ----- (Mobile) -----

Email address: ----- Club Membership Number: -----

Signature of Proposer: ----- DATE: -----



CLUB WILLOUGHBY

Willoughby Legion Ex-Services Club Ltd

SECONDED by: (full name) -----

Of (full residential address) -----

Contact Numbers: (Home) ----- (Mobile) -----

Email address: ----- Club Membership Number: -----

Signature of Seconder: ----- DATE: -----

I, (full name) -----

HEREBY ACCEPT THE NOMINATION FOR THE POSITION AS DIRECTOR OF THE CLUB AND IN DOING SO, I UNDERSTAND THAT IF ELECTED, I SHALL BE REQUIRED TO:

- a. **SATISFACTORILY COMPLETE THE DIRECTOR COURSES MANDATED BY CLUBSNSW WITHIN THE STIPULATED TIMEFRAME; AND**
- b. **SIGN A DIRECTOR'S CONFIDENTIALITY AGREEMENT THAT WILL APPLY DURING, AND SUBSEQUENTLY, TO MY TERM AS A DIRECTOR.**

I ACCEPT THAT A BREACH OF THESE REQUIREMENTS, OR THE CLUB'S BY-LAWS MAY RESULT IN THE TERMINATION OF MY APPOINTMENT AS A DIRECTOR.

Signature of Nominee: ----- DATE: -----