



# STATE VOLLEYBALL NSW INC.

PO BOX 6327  
SILVERWATER NSW 2128

ABN: 37966745699  
FAX: 02 8732 1607

## NOMINATION OF CANDIDATE FOR ELECTION AS A DIRECTOR

**Annual General Meeting  
7.00pm Monday 23<sup>rd</sup> May 2016  
Sports House – 8 Parkview Dr – Quad 1, Level 2, SOP**

We Nominate \_\_\_\_\_ [Candidate Name] as a candidate for election as a Director of the Board of State Volleyball NSW, at the Annual General Meeting, Monday 23rd May 2016.

### **Nominated by two current registered members of SVNSW**

Name: ..... Name: .....

Signature: ..... Signature: .....

To be eligible for nomination for election as a director of the association, candidates must have been a member of SVNSW the year prior to nomination.

**I hereby consent to my nomination for election as a Director of the Board of State Volleyball NSW.**

\_\_\_\_\_  
**Signature of Candidate**

*Candidates are invited to attach a brief profile to this Nomination Form.  
This profile may be up to one A4 page in length and include experience within the volleyball community as well as professional experience which may contribute to their fulfilment of the role of Director of a State Sporting Organisation.*

**Please return the Nomination Form and Profile before midnight Sunday 24<sup>th</sup> April 2016 to  
the Secretary of State Volleyball NSW**

**By Email [secretarysvnsw@gmail.com](mailto:secretarysvnsw@gmail.com) or by Post PO BOX 6327 Silverwater NSW 2128**