



NOMINATION FORM FOR PROVINCIAL COMMITTEE

This form allows individuals to nominate a candidate for a SAPRF GP Committee

Each form:

- Is limited to one nominee
- Must be signed and dated by the nominee
- Must be signed and dated by the proposer

Required disclosures:

- 1. Please disclose any financial, business, professional or personal relationship or interest that would result or would appear to a reasonable person to result in a potential conflict of interest if you were to be elected to serve as a member of the GP committee
- 2. I do not stand to gain any personal profit or compensation of any kind from a matter before the provincial board nor does my spouse, parent or child, by blood, marriage or adoption
- 3. Please disclose whether or not you are a member in good standing, meaning that you have no unpaid and/or past due assessments penalties due to the association

Note:

- Nominee must sign if they are willing to have his/her name place on the ballot and agrees to serve if elected.
- This is a non-salary public service position
- Candidate information: Candidates have to use this space to tell voters a bit more about themselves and why they should be elected to sit on the committee. This statement must be no longer than a single, typed page and cannot contain any defamatory, libellous or profane information. If completed by hand, please make sure the information is legible.





Nominee:

Name:	
Position:	
SAPRF no:	
Address:	
Mobile no:	
Email:	
ID No.	
Province	
Primary Club	
Candidate information	

Signed:	Location:	Date:

Proposer:

Name:	
Position:	
SAPRF no:	
Address:	
Mobile no:	
Email:	
ID No.	
Province	
Primary Club	

Signed:	Location:	Date: