

We as Members of the Waikato District Veteran Golfers Association Inc
wish to nominate the following member for a position on the Executive.

Name of proposed _____

Position _____

Acceptance signature _____

Proposers Name _____

Proposers Signature _____

Seconders Name _____

Seconders Signature _____

Nomination Forms to be in the hand of the Secretary two clear days before the day
of the Annual General Meeting in each year.

Forward to: The Secretary, Waikato District Veteran Golfers Association,
G A Hill, 9 Catherine Crescent, Te Aroha, 3320

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