



Society for Paediatric Anaesthesia in
New Zealand and Australia

NOMINATION FORM

For Election to the Executive Committee of SPANZA

I wish to nominate:

Full Name:

City or Town:

Country:

Nominated By:

Full Name:

Signature:

Date signed:

Seconded by:

Full Name:

Signature:

Date signed:

Nomination to be accepted by the Nominee.

I accept the nomination for SPANZA Executive:

Signed:

Date signed:

Please note:

- All persons listed above need to be current financial members of the Society
- All persons listed above need to be an Ordinary member of the Society
- Please return the form to the SPANZA Secretariat by no later than **3 weeks prior to the AGM date.**
- PO Box 180, Morisset NSW 2264, email: secretariat@spanza.org.au or fax: +61 2 4973 6609

If there are more nominations received than positions available, a vote must be conducted. This will be done prior to the AGM, via email. To ensure this can be done in a timely manner, *you need to provide to the SPANZA Secretariat via email (secretariat@spanza.org.au) a photograph and paragraph of no more than 200 words, introducing yourself and outlining your 'position statement' for what you would like to achieve as part of the SPANZA Executive.*

This must be provided with your nomination form.