



*Alpine Alfisti  
Association of Australia inc.*

Nomination for Committee (FY \_\_ / \_\_ )

Nominee: \_\_\_\_\_ Position: \_\_\_\_\_

Nominee's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Proposed by: \_\_\_\_\_ Signed: \_\_\_\_\_

Seconded by: \_\_\_\_\_ Signed: \_\_\_\_\_

*Nominee, Proposer and Seconder must all be financial members of the Alpine Alfisti Association of Australia*

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