Election of Trustee/Directors of the Carnival Arts and Masquerade Foundation.

NOMINATION FORM

Date: ……

To be returned to the Secretary of your association by:
2nd July 2010

I, …….. (*Proposer - Print Name*)

A member* of ……..……(Name of Costumed Band)***

wish to nominate*:*

……..…. (*Name of Nominee*)

to be a Trustee and Director of the ***Carnival Arts and Masquerade Foundation.*** *I have consulted with the nominee and have their consent to nominate them for the position of Director of the* ***Carnival Arts and Masquerade Foundation.***

(Please give a brief explanation of why you feel that this nominee is suitable to become a Director of the ***Carnival Arts and Masquerade Foundation****. The nominee will also have to provide a statement of why they believe that they are suitable for election to this position).*

I have nominated ……..…… (Name of Nominee) because: -

…… (*Signature of Proposer*)

(*Name of Seconder*)…… (*Signature of Seconder*) ….……

(Must be completed by Seconder before submission)