

NEW ZEALAND SOCIETY OF NOTARIES INCORPORATED

NOMINATION FORM FOR MEMBER OF COUNCIL

Nominations signed by the candidate and two members
To be received by the Secretary no later than 30 August 2021

Full name of candidate: _____

Email address: _____

Phone number: _____

Name of
Nominator: _____

Signature of
Nominator: _____

Name of
Secunder: _____

Signature of
Secunder: _____

I consent to my nomination.

Signature of Candidate: _____

Date: _____