

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 5 September 2022

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: _____