



PO Box 765 Rozelle NSW 2039 | Email: cbcansw@outlook.com | ABN:66 581 126 991

Nomination Form
Election of CBCA NSW Branch Inc Committee - May 2026 to May 2027
Completed form to be returned by Friday May 1 , 2026
Email: cbcansw@outlook.com

Please check the position for which you are nominating this person:

- | | |
|-----------------------|--------------------------------------|
| President | Vice President |
| Finance | Secretary / Minutes Secretary |
| Public Officer | Committee |

Name of Nominee: _____ Membership no: _____

Address: _____

Phone: _____ Email: _____

Working with Children number _____ Expiry date _____

Nominated by: _____ Membership no: _____

Signature: _____ Date: _____

Seconded by: _____ Membership no: _____

Signature: _____ Date: _____

I _____ (insert name) accept the above nomination

I confirm that I have read and agree to abide by the **CBCA NSW Code of Conduct**

I agree to attend monthly committee meetings and participate in planning sessions

Signature: _____ Date: _____

What skillset do you bring to CBCA NSW?

- | | | |
|-------------------------------|------------|--------------------|
| Event Management | Governance | Financial Literacy |
| Graphic Design | Integrity | Confidentiality |
| Willingness to work as a team | | |

Why do you want to join the committee? Tell us about yourself, we welcome new members.