



PO Box 23
Wondai Q 4606
Email: secretary@ahaq.asn.au
Web: www.ahaq.asn.au

Arabic Horse Association of Qld Inc

Committee Nomination Form 2018/2019

Proposer to complete this section:

I, being a current financial member of the AHAQ Inc. wish to nominate:

For the AHAQ Inc Committee for 2018/2019

Full Name (of proposer) :	Signature:
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I, being a current financial member of the AHAQ Inc, second this nomination

Full Name (of seconder)	Signature:
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Nominee to complete this section:

I, agree to my nomination and will attend the monthly Committee meetings and other events as required. I will be willing to assist in the organization of events for the benefit of the Association's members and carry out the responsibilities of a specific member of the committee if these are asked of me.

Full Name (of nominee):

Address:

Contact Phone Number:

Signature:

Please return this completed form to: Secretary AHAQ Inc,
PO Box 23, WONDAI Qld 4606

Ride an Arabian!