

## Sister Cities and Friendly Relationships Working Group Representative Nomination Form

## NOMINATION CONTACT DETAILS

| Representing:       Eg: Community         Representative, School,       Service Club         Name of Nominee:       Image: Community         E-mail Address:       Image: Community         Postal Address:       Image: Community         Telephone Numbers:       Mobile: |                         |         |
|---|-------------------------|---------|
| Representative, School,   Service Club     Name of Nominee:   E-mail Address:   Postal Address:   | Representing:           |         |
| Service Club       Name of Nominee:       E-mail Address:       Postal Address:   |                         |         |
| Name of Nominee:<br>E-mail Address:<br>Postal Address:  | Representative, School, |         |
| E-mail Address: Postal Address:   | Service Club            |         |
| E-mail Address: Postal Address:   |                         |         |
| E-mail Address: Postal Address:   | Norse of Norsings,      |         |
| Postal Address:   | Name of Nominee:        |         |
| Postal Address:   |                         |         |
| Postal Address:   |                         |         |
| Postal Address:   | E-mail Address          |         |
|   | E mail Address.         |         |
|   |                         |         |
|   |                         |         |
|   | Postal Address:         |         |
| Telephone Numbers: Mobile:  |                         |         |
| Telephone Numbers: Mobile:  |                         |         |
| Telephone Numbers: Mobile:  |                         |         |
|   | Telephone Numbers:      | Mobile: |
|   |                         |         |
| Other:  |                         | Other:  |
|   |                         |         |
|   |                         |         |
|   |                         |         |
| Reason for Nominating:  | Reason for Nominating:  |         |
|   |                         |         |
|   |                         |         |
|   |                         |         |
|   |                         |         |
|   |                         |         |
|   |                         |         |
| Signature:  | Signature               |         |
|   | Signature.              |         |
|   |                         |         |
|   |                         |         |
| Date:   | Data                    |         |
|   | Dale.                   |         |

## Please return completed form to either:

- E-mail: <u>council@infogunnedah.com.au</u>
- Post: Gunnedah Shire Council PO Box 63 GUNNEDAH NSW 2380
- By Hand: 63 Elgin Street, Gunnedah