

# BARKLY REGIONAL COUNCIL



## NOMINATION – To the Community Co-ordinator / CEO

\_\_\_\_\_ LOCAL AUTHORITY AREA

### 1. NOMINATORS TO COMPLETE (Please PRINT)

We, the residents named below, are aged 18 years or over and are resident in the  
\_\_\_\_\_ Local Authority area.

We hereby nominate:

First name: \_\_\_\_\_ Family name: \_\_\_\_\_

as an ordinary member of the \_\_\_\_\_ Local Authority.

### NOMINATORS

This nomination MUST be signed by two (2) persons aged 18 years or over and resident in the  
\_\_\_\_\_ Local Authority Area.

Name (Please PRINT) and Signature		Address (Please PRINT)
1.	NAME	
	Signature	
2.	NAME	
	Signature	

# BARKLY REGIONAL COUNCIL



## 2. NOMINEE CONSENT AND DECLARATION (Please PRINT)

\_\_\_\_\_ LOCAL AUTHORITY AREA

I, First name \_\_\_\_\_ Family name \_\_\_\_\_

of \_\_\_\_\_

(Residential Address)

**hereby consent** to be nominated as an ordinary member of \_\_\_\_\_  
Local Authority.

**I declare that I am eligible** to be nominated as a member of \_\_\_\_\_

Local Authority because I am aged 18 years or over and I am resident in the  
\_\_\_\_\_ Local Authority Area.

\_\_\_\_\_  
Signature of Nominee

\_\_\_\_\_  
Date