

Nomination for Board 2016

PLEASE USE B	SLOCK LETTERS	HROUGHOUT:
NOMINEE'S NA	ME IN FULL	
NAME OF BUSI	NESS	
POSTAL ADDRESS TELEPHONE NUMBER FAX NUMBER		
EMAIL		
LINAL		
Proposed by:	Name:	
	Business Name:	
	Date:	
	Signature:	
0	-	
Seconded by:	Name:	
	Business Name:	
	Date:	·
	Signature:	
		minations must be a business owner (or their representative) in Nelson CBD.
I hereby consen		going forward to the Annual General Meeting of Uniquely Nelson be held
SIGNATURE OF	NOMINEE	
(Name in full)		
DATE		

IMPORTANT: Nominations close at 4pm Tuesday 26th September 2016. No late nominations accepted. Nomination forms should be returned by hand-delivery to Uniquely Nelson, Suite 3, Level 1, 244 Hardy Street Nelson 7010 or Fax (03) 546 8403 or scan to simon@uniquelynelson.co.nz