

Palliative Care Australia Limited

PCA Board nomination form

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- Completed nominations forms must be received by 5.00pm Friday 27 September 2019
 - Nominees must be financial members of a PCA member organisation
 - Completed forms are to be sent to Tamara McKee, Company Secretary, via tamara@palliativecare.org.au
 - Please email Tamara McKee or call 02 6232 0700 if you have any questions.
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Nominee

Name: _____

Address: _____

_____ State: _____ Postcode: _____

Phone: _____ Email: _____

Current employer and position: _____

_____ Financial member of PCA member organisation:

Consent of nominee

In signing this consent form, I am declaring I have not been convicted of offences in the promotion, formation or management of a body corporate; have not been convicted of offences involving fraud or dishonesty punishable by imprisonment of three months or more; and am not insolvent under administration within the meaning of the Corporations Act.

Name: _____ Signed: _____

Date: _____

Confirmation by Member Organisation

This candidate is confirmed to be a financial member of _____ (PCAMO).

Name: _____ Signed: _____

Date: _____

*** Please attach photo and half page statement including experience**
