



## NOMINATIONS FOR THE PRESIDENT FREE STATE SOUTH AFRICA SHOWJUMPING

Name of Nominating Club:

Name of Nominee (please print full names)

**Position for which nominated** – *please indicate with an X* 

| <b>1. PROVINCIAL PRESIDENT FREE STATE</b> |
|---|
|---|

| SASJ No | ID No |  |
|---------|-------|--|
| Cell    | Email |  |

Notes:

**Chair/Vice Chair Club nominating** 

Secretary of nominating Club

## Nominee

Signature of the individual being nominated, indicating only that he/she accepts the nomination.

Nominations must be received 7 days before the SGM.

Nominations to be sent to the SASJ Office: tiffany@sashowjumping.co.za

Date

Date

Date