



Papamoa Residents & Ratepayers Association

Committee Nomination Form Year.....

I nominate Name \_\_\_\_\_

Contact Phone \_\_\_\_\_

For the position of (please tick)

Chairman

Secretary

Treasurer

Meetings Organiser

Committee Member

Speaker Coordinator

Social Media/Facebook Coordinator

Other position

Signature of Nominated Person \_\_\_\_\_

Name of Proposer \_\_\_\_\_

Signature of Proposer \_\_\_\_\_ -

Please scan and return to [chairprra@gmail.com](mailto:chairprra@gmail.com) or bring to AGM meeting and submit before the meeting commences.