



**CHELSEA AND DISTRICT BASKETBALL ASSOCIATION
NOMINATION FORM FOR OFFICERS AND COMMITTEE**

WE HEREBY NOMINATE: _____
(Print Name)

FOR: _____
(Position)

PROPOSER: _____
(Print Name)

(Signature)

SECONDER: _____
(Print Name)

(Signature)

DATE: _____

I, _____, accept this nomination.
(Print Name)

(Signature)

DATE: _____

1. PREVIOUS SUB-COMMITTEE AND/OR EXPERIENCE (at CABDA or elsewhere) _____

2. SPECIFIC SKILLS RELEVANT TO CABDA (e.g. basketball, financial, legal, management, public relations, accounting, etc) _____

4. OCCUPATION AND CAREER HISTORY _____

5. PROFESSIONAL QUALIFICATIONS _____

6. BASKETBALL/SPORTING HISTORY _____

7. OTHER INTERESTS _____

8. REASONS FOR NOMINATING _____
