1. **Complete your contact details:**

**Title:** Click here to enter text.

**First Name:** Click here to enter text. **Surname:** Click here to enter text.

**Street Address:** Click here to enter text.

**Postal Address:** Click here to enter text.

**Suburb/Town:** Click here to enter text.

**Phone Number:** Click here to enter text.

**Email:** Click here to enter text.

1. **Please indicate if you are already on, or have previously been on another Council Committee? If so please state the Committee:**

Click here to enter text.

1. **Tell us why you would like to join this Committee:**

Click here to enter text.

1. **Are you a member of any other Community or Cultural Organisation? If so please list your membership status:**

Click here to enter text.

**CERTIFICATE**

I, the undersigned, certify that:

The statements in this nomination form, are true and correct to the best of my knowledge, information and supporting material are my own work.

I give permission for Council to verify statements outlined on this form.

**Signature: Date:**

**Name:** Click here to enter text.