



Nomination Form

AMA Victoria

CANDIDATE: _____
Full Name as per your AHPRA Registration (Print clearly)

Membership Number:
(Print clearly)

OFFICE:
AMA VICTORIA NOMINEE to AMA LIMITED BOARD

SECONDER (required)

I, the undersigned Ordinary or voting Associate member of AMA Victoria, second the above Candidate for the above office:

Full Name Full Name (Print clearly)	Membership Number	SIGNATURE	DATE
			_ / _ / _

CANDIDATE NOMINATION AND CONSENT

I, the abovenamed Candidate nominate for the above office. I declare that I am an Ordinary or voting Associate member of AMA Victoria and am not disqualified from being a candidate under the AMA Victoria Constitution and Regulations.	
Signed:	Date _ / _ / _

Eligibility Requirements

The candidate and seconder must both be Ordinary or voting Associate members of AMA Victoria. Candidates and seconders should verify their membership status prior to submitting nominations.

How To Submit Nominations

Nominations close at **8am on Monday 24 March 2025**. Nomination Forms must be received by that time by email to companysecretary@amavic.com.au

PLEASE NOTE:

- It is your responsibility to ensure that your nomination is received by the Company Secretary **BEFORE** nominations close.
- Emails to the AMA Victoria email inbox that appear to be spam may be blocked and emails greater than 6 MB in size may not be accepted by the AMA Victoria firewall.
- You may contact the Company Secretary on companysecretary@amavic.com.au to enquire about the status of your nomination.

Acknowledgment You will be sent an acknowledgment of receipt of your nomination by email.

Peter Goffin
Company Secretary
Email: companysecretary@amavic.com.au