COELIAC NEW ZEALAND AGM NOMINATION FORM

NAME:……………………………………………………………………………………………………………………………………………….

City of Residence:………………………………………………………………………………………………………………………………

Email address:……………………………………………………………………………………………………………………………….....

Summary of Career/Life skills and hobbies:………………………………………………………………………………………..

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Please continue on separate sheet if necessary.

What do you think you can bring to the CNZ Executive Committee:…………………………………………………..

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Nominated by:……………………………………………………..…Seconded by:…………………………………………………….