

Canadian Association of Municipal Administrators Board of Directors Nomination Form (2010-2011)

NOMINEE

Name and Title: _____

Name of Municipality: _____

Address: _____

City/Town: _____ Province _____ Postal Code: _____

Telephone: (____) _____ Fax: (____) _____

E-Mail: _____

NOMINATOR

Name and Title: _____

Name of Municipality: _____

Address: _____

City/Town: _____ Province _____ Postal Code: _____

Telephone: (____) _____ Fax: (____) _____

E-Mail: _____

Signature: _____ Date: _____

NOMINATION PROCESS

Nominations to the Board of Directors can be made by any CAMA member and a copy of this form and the **nominee's bio** sent to the CAMA National Office at the address noted below or via e-mail (admin@camacam.ca) **before April 1st, 2010**:

Ms. Jennifer Goodine
Executive Director
CAMA National Office,
P.O. Box 128, Station A,
Fredericton, NB, E3B 4Y2