



Canadian Border Collie Association
Nomination for Director 2014-15

Name of Nominee:

Address of Nominee:

I, a member in good standing of the CBCA, nominate the above person for the office of Director for the East West (cross out one) Region for the two year term beginning January 2014.

1. Name of member:
Address of member:
Date:

2. Name of member:
Address of member:
Date:

(Two members must sign for each nomination)

I, _____, a member in good standing of the CBCA resident in the East West (cross out one) consent to be nominated for the office of Director for the two-year period beginning January 2014.

Signature:

Date: