



PISTOL
New Zealand

NOMINATION FOR
CAS Section Director
Nominations close – 30th
September 2010



Section to be completed by the person accepting nomination

Name:			
Address:			
Telephone:		Cell Phone:	
Email Address:			
Club:		FM1: <i>(If known)</i>	
Declaration: I accept nomination for the above position. I am a current financial member of the above club and Pistol New Zealand.			
<hr/>			
Signed:			Date:

(Please completed all highlighted boxes)

Section to be completed by the person making the nomination.

Name of Nominator:			
Address:			
Telephone:		Cell Phone:	
Signed:			
Email address:			
Club:		FM1: <i>(If known)</i>	

(Please completed all highlighted boxes)

When completed, please send the form to:

Fax: 06-8707574

Address: P O Box 391, Hastings, 4156

Email: exec@pistolnz.org.nz

Please include, in no more than 150 words, a pen portrait of yourself that can be included in Bullshooter and / or on the website as well as a current Passport size photograph.