



NOMINATION FORM I.S.L.T.A. COUNCIL OF MANAGEMENT

We, the undersigned, being members of the Illawarra Suburbs Lawn Tennis Association,

Nominate.....

Address.....

Phone number..... Mobile number.....

Email address.....@.....

to the position of

on the Main Body Council of Management.

Member 1

Member 2

Member 3

Member 4

Member 5

*2 signatures are required for position as councilor or general office holder,
5 signatures required for President, Vice President, Secretary, Treasurer and
directors.*

I accept the above nomination

(Nominee sign above)

Date