

## FORM D: REGIONAL COMMITTEE NOMINATION FORM

REGION: \_\_\_\_\_ (Please name Region this nomination refers to)

We, being members of the Alpaca Association New Zealand Inc.

_____ (Name of proposer)	_____ (Name of seconder)
_____ (Proposers home address)	_____ (Seconders home address)
_____ (Date)	_____ (Date)

nominate the person below, who is a member of the Association, as a candidate for an office specified below at the election of the National Council members which may be held by ballot vote.

Name: \_\_\_\_\_

### OFFICES FOR WHICH WE NOMINATE THE CANDIDATE:

**PRESIDENT, VICE PRESIDENT, SECRETARY, TREASURER, REGIONAL MEMBER OF COUNCIL**

**(Circle the office(s) for which he/she is nominated)**

A candidate may stand for any National Council position(s) and/or for any Regional Committee position but, on election to any office, the nominee must follow the criteria set out in rule 98 of the AANZ Constitution.

### CANDIDATE'S CONSENT TO THE NOMINATION AND DECLARATIONS

I, \_\_\_\_\_

**(Name of candidate)**

of \_\_\_\_\_

**(Candidate's address)**

Consent to this nomination.

- I declare that I am the registered owner of alpacas in New Zealand or the holder of a joint interest in registered alpacas in New Zealand.
- I declare that I am a permanent resident in New Zealand.
- I declare that I am not disqualified from holding office in the AANZ (see rule 92 of the AANZ Constitution).

_____ (Candidates signature)	_____ (Date)
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Updated in 2023/2024 to align with the Incorporated Societies Act 2022.

(NZBN: 9429042845331) [Incorporated Society] Registered