

SOUTH AFRICAN SWIMMING OFFICIALS ASSOCIATION

NOMINATION FORM

for EXECUTIVE COMMITTEE – 2008 to 2010

NAME OF NOMINEE Please print	Province	SIGNATURE OF NOMINEE To indicate Acceptance

NAME OF PROPOSER – please print: _____

SIGNATURE OF PROPOSER: _____

PROVINCE: _____ **DATE:** _____

Please note: Nominations will not be accepted unless the person being nominated has signed to indicate that they accept the nomination.

Kindly return this form to the Secretary – fax (011)783-3900 - by Friday 28 March 2008