

NBMA NOMINATION FORM

I, \_\_\_\_\_, RMT # \_\_\_\_\_, agree to let my name stand for the position of \_\_\_\_\_ on the Board of Directors of NBMA.

I have read the job description and understand the rights and responsibilities of the position and that it is for a term of two years. I also confirm that I am a member in good standing with NBMA.

Date \_\_\_\_\_ signed \_\_\_\_\_

This nomination is supported by two NBMA members in good standing

Date \_\_\_\_\_ signed \_\_\_\_\_ RMT# \_\_\_\_\_

Date \_\_\_\_\_ signed \_\_\_\_\_ RMT# \_\_\_\_\_