INNER WHEEL AUSTRALIA INC.

FORM 15

NOMINATION FORM

IWA VICE PRESIDENT

Return completed form to IWA Secretary together with Form 12 iiw.au.nationalgb@gmail.com prior to 30 September

District **A**..... hereby nominates the following for the position of IWA Vice President for the year 20___/20___.

NOMINEE DETAILS

NAME
ADDRESS
PHONE NUMBER
MOBILE
EMAIL
INNER WHEEL CLUB OF

DISTRICT A

The following necessary qualifications of the Nominee have been checked and verified.

- 1. Verification of Qualifications for IWA Vice President Nominee Form 12 from Club.
- 2. A recent (taken in the last 6 months) **PASSPORT SIZE** photograph.

The above nomination was made at a regularly constituted meeting of the District

Committee of District A Held on (date) ____/___/

(Signed) District Chairman

District Secretary