

NOMINATION FORM

Board of Management

I, (full name)

Of, (address)

.....

.....

**Agree to accept nomination as a Board Member of
Remote & Isolated Children's Exercise Inc.**

For the position of:

Board Member

EXECUTIVE MEMBER:

Chairperson

Vice Chairperson

Secretary

Treasurer

Public Officer

Nominee Signature

Date

Please forward completed form to: admin@rice.org.au