The Australian Ophthalmic Nurses' Association

Nomination form for Election of Office Bearers at the Annual General Meeting

Membership	Nominee	Signature of nominee or date of verbal agreement	Nominated by	Signature	Seconded by	Signature
President						
Education Co-ordinator						
Secretary						
Treasurer						
Membership Secretary						
Committee Member						
Committee Member						
Committee Member						
Committee Member						

All nominees must be current financial members of the Association and be willing to serve a term on the executive committee.

Committee Member Signature: _____
Date: _____

This nomination form is to be returned to:

the Secretary via the admin@aona.au email address no later than one (1) week prior to the Annual General Meeting.