

Friends of Carlisle Park (FoCP)

Nomination form

Please print

I (Full name) _____

of (Address with postcode)

nominate

_____ (Full name)

of _____ (Address with postcode)

For the position of:

Chair/Vice-Chair/Secretary /Treasurer/Committee Member

of Friends of Carlisle Park 2017-18 (Circle as appropriate)

I have obtained permission from the person nominated to make this nomination.

Signature:

Seconded by:

_____ (Full name)

_____ (Address)

Signature: _____

Please note that all nominees, proposers and seconders must be members of Friends of Carlisle Park and live in Hampton.

**The deadline for the return of nomination forms is 25th June.
Forms may be returned by email or by post to 37 Wensleydale Road,
Hampton, TW12 2LP.
Please address the envelope to FoCP**