



## Nomination Form for CHS-MC Board Positions

I, \_\_\_\_\_  
(Please print name)

declare that I am a member in good standing of the Canadian Hemophilia Society, Manitoba Chapter and that I am willing to have my name stand for election to the Board of Directors, for the position of:

\_\_\_\_\_  
(Please print) (Executive position or Directorship)

at the next AGM on **April 16<sup>th</sup>, 2016**

\_\_\_\_\_  
(Signature)

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**Nominated by:**

\_\_\_\_\_  
(Please print)

declaring that I am a member in good standing of the Canadian Hemophilia Society, Manitoba Chapter.

\_\_\_\_\_  
(Signature of Nominator)

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**Nominations cease and will NOT be accepted after April 1st, 2016.**

***Please note, that nominations will only be accepted from this completed form, (can be photocopied). All forms must be returned by April 1st, 2016 to:***

944 Portage Avenue Winnipeg, Manitoba R3G 0R1  
Telephone: 204.775.8625 Fax 204.774-9403 Toll Free: 1.866.775.8625  
Email: [info@hemophiliamb.ca](mailto:info@hemophiliamb.ca) Web site: [www.hemophiliamb.ca](http://www.hemophiliamb.ca)