NORTHERN AREA OF THE BRITISH MODEL FLYING ASSOCIATION 2018/19 ELECTION OF OFFICERS

NOMINATION FORM (PLEASE COMPLETE, IN FULL, ALL SECTIONS)

NOMINATED OFFICE			
FULL NAME		MEMBERSHIP No	
ADDRESS			
TELEBLIONE No.	DAVTIME	EVENING	
TELEPHONE Nos	DAYTIME	· ·	
	BIOGRAPHICAL DETA		
DATE OF BIRTH	/OCCUPATION		
AEROMODELLING E	XPERIENCE:-		
ADMINISTRATIVE EX	PERIENCE:-		
A CRIPATIONIC FOR T	THE ELITHDE OF THE MODILIEDAL ADEA DA	AFA.	
ASPIRATIONS FOR I	HE FUTURE OF THE NORTHERN AREA BI	ЛГА:-	
DECLARATION: Lam	willing to serve, as nominated, if elected.	SIGNATURE_	
DECENTION: Fam	willing to correct as normalized, in closted.		
NOME TO DAY		DATE	
(Plea	ase print full title of club)	CLUB/FELLOW CLUB No	
SIGNED		CLUB OFFICIAL/FELLOW	
	POSITION_		
TO BE RETURNED TO	O: THE BMFA NORTHERN AREA SE	CRETARY	