

NORTHERN AREA OF THE BRITISH MODEL FLYING ASSOCIATION
2019/20 ELECTION OF OFFICERS

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

NOMINATED OFFICE _____

FULL NAME _____ MEMBERSHIP No _____

ADDRESS _____

_____ POSTCODE _____

TELEPHONE Nos DAYTIME _____ EVENING _____

BIOGRAPHICAL DETAILS

DATE OF BIRTH/...../..... OCCUPATION _____

AEROMODELLING EXPERIENCE:-

ADMINISTRATIVE EXPERIENCE:-

ASPIRATIONS FOR THE FUTURE OF THE NORTHERN AREA BMFA:-

DECLARATION: I am willing to serve, as nominated, if elected.

SIGNATURE _____

DATE _____

NOMINATED BY _____ CLUB/FELLOW CLUB No _____
(Please print full title of club)

SIGNED _____ CLUB OFFICIAL/FELLOW

DATE _____ POSITION _____ MEMB No _____

TO BE RETURNED TO: THE BMFA NORTHERN AREA SECRETARY