New Lambton Football Club

NEW LAMBTON FC JUNIORS

Our Life Membership Nomination Form

Life Member Nominee: ……

Positions & Roles held by Nominee: ……

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Reason for Nomination (if insufficient space, attach a separate document): ……

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Proposed By: …… Signature: ……

Date: ……..

Seconded By: …… Signature: ……

Date: ……..

By signing this form the proposer has truthfully submitted the reasons of Life Membership nomination and the seconder agrees with the reasons and the nomination.

Additional Comments: ……

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To be eligible for Life Membership the member must meet the requirement outlined in the Club Life Membership Policy.

EXECUTIVE USE ONLY

Meets the minimum 8 year requirement?	Yes / No (circle as appropriate)
Meets at least 4 of the 9 criteria in the Policy?	Yes / No (circle as appropriate)
Meets nomination by member requirement?	Yes / No (circle as appropriate)
Meets 75% or more of the secret ballot requirement?	Yes / No (circle as appropriate)
Approved for Life Membership?	Yes / No (circle as appropriate)

Executive 1 Name: …… Signature: ……

Date: ……..

Executive 2 Name: …… Signature: ……

Date: ……..