

THE B.C. MUSLIM ASSOCIATION

NOMINATION FORM for: _____ Branch/Chapter for Term: 2017 – 2019

THE UNDERSIGNED NOMINATE

Last Name: _____ First: _____ Middle: _____
*** Full legal name only ***

Residential Address # : _____ Street: _____ City: _____ Postal Code: _____

Phone # : (Home): _____ (Work): _____ (Cell): _____

E-mail Address: _____

DECLARATION of NOMINEE

I declare that I

- a) am a practicing Sunni Muslim
- b) understand the Constitution of **THE B.C. MUSLIM ASSOCIATION** and its **PURPOSES, CREED and PREAMBLE**
- c) am a member in good standing as per **THE B.C. MUSLIM ASSOCIATION CONSTITUTION** and am eligible to be nominated as per clauses 5.5 and 5.6 and, if required, clause 7.10 and 7.11.
- d) am not an **EXECUTIVE, OFFICIAL, OFFICER or MANAGEMENT** of another Muslim Organization: *If you are please provide the name of that organization:* _____
- e) am forty (40) years of age or under to meet the qualifications for **YOUTH DIRECTOR** (YOUR AGE: _____).

Signature: _____ Date: _____, 2017. Membership # _____
*** Signed in front of NOMINATORS***

Also PERSONAL PROFILE, OATH of OFFICE and CONFIDENTIALITY AGREEMENT must be COMPLETED with this Nomination

Must be NOMINATED by two members of The B.C. Muslim Association in good standing

Last Name: _____ First: _____ Middle: _____
Full legal name only

Address : _____ City: _____

Phone # : _____ E-mail Address: _____

Signature: _____ Date: _____, 2017. Membership #: _____

Last Name: _____ First: _____ Middle: _____
*** Full legal name only***

Address : _____ City: _____

Phone # : _____ E-mail address: _____

Signature: _____ Date: _____, 2017. Membership #: _____

Open from June 30th to July 22nd by 6:00 PM– fax to 604-244-9750, deliver to Head office or e-mail to election2017@thebcma.com

ALL FIELDS must be completed BEFORE SUBMITTING