



Sunshine Coast Minor Hockey Association
PO Box 1879
Sechelt BC, V0N 3A0
www.scmminorhockey.com
Leading, Developing and Promoting Positive Hockey Experiences

BOARD OF DIRECTORS NOMINATION FORM

We, the undersigned members of the Sunshine Coast Minor Hockey Association hereby nominate:
_____ (name of nominee) of _____, B.C. as a candidate for
the position of _____ (specify position).

Nominated and signed this: _____ day of _____ 20 ____.

(signature of nominating member)

(signature of nominating member)

CANDIDATE ACCEPTANCE

I, the undersigned _____, named in the foregoing nomination, hereby affirm the following:

- a. That I am a member in good standing with the Sunshine Coast Minor Hockey Association;
- b. That I will adhere to the Constitution, Bylaws, and Regulations of the Association;
- c. That I am willing to dedicate the necessary time and commitment to contribute to the betterment of the entire organization;
- d. That I will strive to make decisions with integrity and always in the best interest of the Association;
- e. That I understand the time commitment required for the responsibilities of this position, including attending meetings and fulfilling the duties as outlined in the job description; and
- f. That I will accept the office of _____ if elected.

Signed:

(signature of nominee)

Signed this: _____ day of _____ 20 ____.

Submit completed nomination form to secretary@scminorhockey.com

Important Note: Nominations will only be accepted from the floor during the AGM if no prior nominations have been received for the available positions. Therefore, we encourage timely submissions to ensure a smooth and efficient election process.