



# The Australasian Marine Pilots Institute

## **AMPI Elections 2017**

### **Nomination Form**

**This Form Must be Returned to: The Secretary, PO Box 576, Albion  
QLD 4010, by, Friday 29<sup>th</sup> October 2017  
or email to [secretary@ampi.org.au](mailto:secretary@ampi.org.au)**

I,.....(print name) being a financial member of AMPI  
nominate

.....as a member of AMPI Board.

.....(Signature)

I,..... (print name)being a financial member  
of AMPI second the nomination of

.....as a Member of AMPI Board.

.....(Signature)

I accept the nomination for the position of AMPI Councilor for the following region.

.....(Signature)

**Please tick appropriate box.**

**. WA**

**SA & NT**

**. VIC & TAS**

**NSW**

**. GBR**

**NTH QLD**