

## WESTERN AUSTRALIAN NATIVE ORCHID STUDY AND CONSERVATION GROUP (INC)

PO Box 323 Victoria Park WA 6979 www.wanoscg.com.au

## SUBSIDIARY OFFICE NOMINATION FORM

## NOMINATION

(Name in Full – Capital Letters)

Of (address) \_\_\_\_\_

being an ordinary member of the Western Australian Native Orchid Study and Conservation Group (Inc) (**WANOSCG**) do hereby nominate for the following WANOSCG Subsidiary Office position(s) each of which shall act under the direction of the WANOSCG Committee:

Year of position(s): \_\_\_\_\_

Subsidiary Offices	Requirement	Mark with an 'X'
Field Trip Co-ordinator	Committee Member	
Conservation Officer	Committee Member	
Membership Officer	Committee Member	
Branch Liaison Officer	Committee Member	
Bulletin Editor	Any Ordinary Member	
Librarian	Any Ordinary Member	
Supper Co-ordinator	Any Ordinary Member	
Web Site Administrator	Any Ordinary Member	
Facebook page Administrator	Any Ordinary Member	

## Signature of Nominee:

Date: \_\_\_\_\_