



CIBSE Australia and New Zealand Region Committee Nomination Form 2023

Date ___ / ___ / 2023

Full Name of the Nominee: (self-nominations are allowed)	
Nominee's Contact Phone Number:	
Nominee's Email:	
Nomination for the position of: (please tick)	<input type="checkbox"/> Australia and New Zealand Chair <input type="checkbox"/> Vice Chair <input type="checkbox"/> Hon Secretary <input type="checkbox"/> Hon Treasurer <input type="checkbox"/> Chapter Chair NZ <input type="checkbox"/> Chapter Chair New South Wales <input type="checkbox"/> Chapter Chair Victoria <input type="checkbox"/> Chapter Chair Western Australia <input type="checkbox"/> Chapter Chair South Australia <input type="checkbox"/> Chapter Chair Queensland
Nominated by:	
Signature of Nominee:	

Send to secretary@cibse.org.au