

## **Life Membership Nomination Form**

### **Nominee Details**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### **Nominator Details**

Full Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### **Seconder Details**

Full Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### **Nomination criteria to be eligible for Life Membership:**

The nominee must have made a significant and sustained contribution to the Esperance Speedway Association.

Please provide details below outlining their service and achievements.

1. Years of Service to the Club: \_\_\_\_\_

2. Roles Held and Contributions:

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3. How has the nominee demonstrated dedication and commitment to the Esperance Speedway Association?:

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4. Any additional comments or reasons for nomination:

## Declaration

By signing below, the Nominator and Seconder confirm that the information provided is accurate and that the nominee meets the criteria for Life Membership.

Nominator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Seconder Signature: \_\_\_\_\_ Date: \_\_\_\_\_