

# GOOSNARGH & LONGRIDGE AGRICULTURAL SOCIETY LIMITED

## Nomination Form

### For completion by the Proposer and Seconder

We the undersigned wish to nominate \_\_\_\_\_ for the position of:

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Chairman

Secretary

Treasurer

<input type="checkbox"/>
<input type="checkbox"/>

Committee Member

Member of the Board of Trustees/Director

(Please mark the appropriate box)

Full name of Proposer:

Signature of Proposer:

Date:

Full name of Seconder:

Signature of Seconder:

Date:

### For completion by nominee:

I confirm that, if successful elected to the above position, I am willing to serve.

Signature of Nominee:

Date:

This completed form must be returned to the Secretary c/o Hills Fine Foods, Shay Lane Industrial Estate, Shay Lane, Longridge, PR3 3BT, no later than 7 days before the date of the Annual General Meeting