



The Authentic Voice Of and For Victorians Who Use Drugs
NOTHING ABOUT US - WITHOUT US!

NOMINATION FORM

I wish to nominate: to the Board of Harm Reduction Victoria.

Name of Proposer:

Signature of Proposer:

Date:

Name of Secunder:

Signature of Secunder:

Date:

NB: The proposer and secunder and the person being nominated (nominee) must be members of Harm Reduction Victoria.
If you are unsure about your membership status, please call Harm Reduction Victoria to check and/or to update your membership and contact details.

IMPORTANT

To lodge this proxy form either:



Fax this completed form to Harm Reduction Victoria on 03 9329 1501



Email the form to admin@hrvic.org.au



Post it to Harm Reduction Victoria, PO Box 12720 A'Beckett Street, Melbourne. Vic. 8006



Or deliver it in person to Harm Reduction Victoria, 128 Peel St, Nth Melbourne, Victoria

This nomination form must be received by COB on Wednesday November 28th 2018

(*COB= Close Of Business)

PO Box 12720 A'Beckett Street VIC 8006

Ph. 03-93291500 Fax 03-9329 1501

www.hrvic.org.au



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