

AUSTRALIAN CROQUET ASSOCIATION INC. ARBN 089 265 707

NOMINATION FORM 2010

(Not required for Appointed Positions)

I(Full name)	
Accept nomination for the position of:	
Dated:	Signed:
Nominator:	
(Nominator is Law 25.1.7)	required to be a Representative of a State Association, see By
	BRIEF PROFILE OF NOMINEE

Please forward to:

ACA Executive Director

PO Box 675

BRIGHTON SA 5048

before 16 November 2009