



3 Concorde Gate, Suite 302, Toronto, Ontario, M3C 3N7

Telephone: (416) 426-7167 Fax: (416) 426-7364 E-Mail: [o5pba@o5pba.ca](mailto:o5pba@o5pba.ca) Website: [www.o5pba.ca](http://www.o5pba.ca)

## PRESIDENT'S MEETING VOTING DELEGATE / MEETING ATTENDANCE FORM

Zone/Decentralized Association: \_\_\_\_\_

Secretary's Name: \_\_\_\_\_

**PLEASE COMPLETE AND RETURN THIS FORM TO THE PROVINCIAL OFFICE ON  
OR BEFORE FRIDAY, OCTOBER 14, 2011.**

**WARNING!!!! – IN ORDER TO INSURE THAT VOTING DELEGATE PRIVILEGES ARE  
NOT REVOKED, THE 2011-12 ASSOCIATION INSURANCE REGISTRATION FORM  
(CONTAINED IN THE INCENTIVE PACKAGE) MUST BE FILED WITH THE  
PROVINCIAL OFFICE.**

**VOTING DELEGATE #1:** \_\_\_\_\_

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

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**VOTING DELEGATE #2:** \_\_\_\_\_

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

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**VOTING DELEGATE #3:** \_\_\_\_\_

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

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

VOTING DELEGATE #4: \_\_\_\_\_

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

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## PRESIDENT'S MEETING ATTENDANCE SUMMARY

In order for the Provincial Office to properly coordinate the meeting, we ask your cooperation in completing the bottom portion of the form.

Our Zone/Decentralized Association will require a total of \_\_\_\_\_ seats for the President's Meeting.

Enclosed is a cheque in the amount of \$ \_\_\_\_\_ which is the total number of Guests attending the President's Meeting @ \$5.00 each.

Please **PRINT** the names of **ALL** the people that will be attending the President's Meeting from your Zone/Decentralized Association.

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_ 6. \_\_\_\_\_

7. \_\_\_\_\_ 8. \_\_\_\_\_

9. \_\_\_\_\_ 10. \_\_\_\_\_

11. \_\_\_\_\_ 12. \_\_\_\_\_

13. \_\_\_\_\_ 14. \_\_\_\_\_