

NOMINATION FORM

ELECTION TO ThunderCon BOARD OF Directors



Name of Nominee: _____

Organization and Position: _____

Address: _____

Tel No: _____

Email: _____

Skills & Experience *(see Board Job Description)*

Please give details below of your skills & experience and indicate why you wish to be a Board Member. (No more than 200 words.)



Nominated by*: _____
Position: _____
Organization: _____
Tel No: _____
Email: _____

*Requires a ThunderCon member to second the nomination.

I confirm I have gained the nominee's consent for their name and details to go forward.

Signed: _____

Date: _____
Please email completed form to: members@thundercon.org by December 30th, 2022

**Please note that this nomination will be invalid
unless this form has been fully completed.**

