

**NOMINATION FOR ELECTION TO THE COUNCIL  
OF THE AUSTRALIAN MEDICAL ASSOCIATION NT INCOPROATED**

We nominate \_\_\_\_\_

for the position of **President, Vice-Presidents (two positions 1 x Top End & 1 x Central Australia), Secretary / Public Officer, Treasurer, members of the Council (including one DiT)**  
(strike out whichever does not apply)

Proposed by \_\_\_\_\_

Seconded by \_\_\_\_\_

Signed acceptance of nomination by nominee \_\_\_\_\_

Dated \_\_\_\_\_

**THE COMPLETED NOMINATION FORM MUST BE RETURNED TO:**  
THE EXECUTIVE OFFICER, AMA NT Inc., PO BOX 2299, PARAP, NT 0804 or  
BY FAX TO 08 8941 0937 or  
EMAIL A SCANNED COPY TO [ftomson@amant.com.au](mailto:ftomson@amant.com.au)  
BY 5.00 PM ON 19 May 2021

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