



We, the undersigned, being eligible voting members, hereby nominate:

Name: _____

Address: _____

City:_____ **Prov:**_____ **PC:**_____

Phone: _____ **E-Mail:** _____

For the position of (please check one):

Chair **Vice Chair** **Treasurer** **Special Events** **Senior Resource Chair**

Junior Resource Chair **Communications Chair** **KT Chair**

INDIVIDUAL NOMINATORS:

The Chief nominator is responsible for ensuring that all 4 nominators (plus the Chief) are eligible before submitting the nomination form. Members eligible to nominate are CPA voting members, who include; Full Members, Life or Honorary Members who are physiotherapists, Student Members and Associate Members. The Chief Nominator is to register as # 1.

Name	CPA number	Signature

Please attach a 100-word summary of why you want to be an Orthopaedic Division executive and what you hope to accomplish.

Nominations are due by March 19, 2021 Please email completed form and supporting documents to Jennifer MacMillan: orthodiv@shaw.ca