



NOMINATION FORM

ANNUAL GENERAL MEETING

1.30pm on Saturday 13 April 2019

The constitution of the Malt Whisky Society of Australia states that:

6.5 The committee shall be comprised of the four office bearers - chairperson, secretary, treasurer, vice-chairperson - and no less than four and no more than six committee members.

[This means that a financial member can complete this Nomination Form to nominate another financial member (or themselves) for election to a position. The member can nominate more than one person (or themselves) for a position by completing another Nomination Form. The member can nominate a person (or themselves) for more than one position by completing another Nomination Form. You must submit a SEPARATE form for EACH nomination. The forms should be completed and returned at least 2 days before the AGM.]

Being a financial member of the Malt Whisky Society of Australia, I nominate to the following position:

Position being nominated to:... **Committee Member**

Name of the person nominated: _____

YOUR FULL NAME:
(IN BLOCK LETTERS): _____

Signature: _____

Date: _____ 2019

Please return to:
MWSOA
PO Box 206 Glen Osmond SA 5064

Or scanned and via e-mail to: chair@maltwhiskysociety.org.au



**Malt
Whisky
Society
Of
Australia
Inc**

PROXY VOTING FORM

ANNUAL GENERAL MEETING

1.30pm on Saturday 13 April 2019

The constitution of the Malt Whisky Society of Australia states that:

11.5 A member shall be entitled to appoint in writing a natural person who is also a member of the association to be their proxy, attend and vote at any general meeting of the association.

[This means that a financial member who is unable to attend the AGM may appoint another financial member who is attending the AGM to represent their vote. This form should be completed and returned to that person before the AGM.]

Being a financial member of the Malt Whisky Society of Australia, I endorse to represent my vote the following person who will be in attendance at the Annual General Meeting:

Name of the person voting on your behalf:.....

**YOUR FULL NAME:
(IN BLOCK LETTERS):**

Signature:

Date: _____ / _____ /2019

Please return this completed form to:

The person who will represent your voting interest at the AGM (or send a scanned copy of the completed and signed form to the Chairperson, Craig Daniels) at chair@maltwhiskysociety.org.au