



NOMINATION FORM FOR CAFWAA Executive 2009/2010

**Child &
Family Welfare
Association of
Australia Inc.**

ABN 65 962 251 319

ADMINISTRATION &
CORRESPONDENCE TO:
Locked Bag 13
Haymarket
NSW 1240

Ph (02) 9281 8822
Fax (02) 9281 8827
cafwa@acwa.asn.au
www.cafwaa.org.au

STATE MEMBER
ORGANISATIONS

- Association of Childrens Welfare Agencies (NSW)
- Child & Family Welfare Association of South Australia
- Child & Family Welfare Association of Tasmania
- Child, Youth & Family Agencies of the ACT
- Centre for Excellence in Children & Family Welfare, Victoria
- Children's Youth & Family Agencies Association (WA)
- PeakCare (Qld)

Incorporated in Victoria
No A0032610M
Registered office
Level 5,50 Market
Street,Melbourne, VIC, 3000

I,

being the representative of:

.....
wish to nominate as an office bearer on the Board of Management as indicated below:

Signature of Nominee: _____

Date: / /

Nominated by: _____

Representative of: _____

Date: / /

Seconded by: _____

Representative of: _____

Date: / /

*Please forward this form to the CAFWAA Secretariat
by C.O.B. Thursday 12 November 2009*

OFFICE BEARER POSITION

Please tick one of the following Office Bearer positions you wish to nominate for:

- Chairperson
- Vice Chairs (Two positions)
- Secretary
- Treasurer

Note: Nominations must be forwarded to reach the CAFWAA Secretariat by C.O.B. **Thursday 12 November 2009**

Please return this form by fax on 02 9281 8827