CWWA Director Nomination Form

Please complete and return to CWWA by **September 17, 2021** fax: (613) 747-0523 or E-mail to rhaller@cwwa.ca

	[please enter information requested]
Ι	
being the prime contact for	
hereby nominate	Note 1
of [name the Utility Member] Note 2
to be Director for the Province of	
The nominee should be aware of and agree with the nomination being made. Note 2 The nominee may be an employee of another Utility Member, in which case both the Prime Contact for that Utility Member and the nominee should be aware of and agree with the nomination being made.	
Contact details of Nominee	Title: Tel: () Fax: () E-mail:
Dated:	Signature: