

The Probus Club of Port Melbourne



PO Box 248 Port Melbourne VIC 3207 Email: port.probus@gmail.com

Nomination for Life Membership

Name of Member being Nomi	nated			
Name				
		S / No		
Has Member agreed to accept Nom	ilnation tes	s / No		
Person making Nomination	***************************************	•••••	•••••	
-	(Must be a current Member of Club)			
Seconded By				
	(Must be a	current Member	of Club)	
Date of Nomination			•••••••••••••••••••••••••••••••••••••••	
Details of Nominated Person				
Date joined the Club		••••••		
What Committee Roles Has The Nominated Person Held?				
Committee Roles Held		Start Date	End Date	

Has the Nominated Person Rendered Any Outstanding Services To The Club That Should Be Considered By The Committee When Considering This Application? Yes / No? If the answer is Yes, please provide a brief summary of each Outstanding Service you wish to bring to the attention of the Committee			
If more information is ava	ilable, please attach additional sheets.		
Signatures			
Nominator			
Date			
Seconder			
Date			
Received By Club Secre	etary		
Date			