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| **Nomination Form** |  |
| **Rotary Leadership Institute - District 9820** | |

*PLEASE PRINT CLEARLY*

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| Rotary Club: | | |
| Name: | Badge Name (if different) | |
| Address: | | |
| City: | State | Post Code: |
| Telephone (H): | Telephone (M): | |
| E-mail: | | |
| Date Joined Rotary (Month / Year): | | |
| Current Position in Rotary: | | |
| Other Positions previously held in Rotary: | | |
|  | | |
|  | | |
| Special Dietary Requirements: | | |

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Forward completed form to Tim Wills** | **E:** [publicimage@district9820.org](mailto:publicimage@district9820.org) | **M:** 0490 849 466 |

**A fee of $75 to cover printing and catering costs will be charged to your club**