



Association of Alcohol and other Drug Agencies NT Inc

NOMINATION FORM

I am available for nomination to serve as a 2022-2023 **BOARD MEMBER** with The Association of Alcohol and other Drug Agencies NT Inc.

Nominee Full Name:

Signature: Date:/...../.....

For position of:

- Chairperson Vice Chairperson Secretary Treasurer
Public Officer Ordinary Board Member

Nominated by:

Full Name:

Signature: Date:/...../.....

For Office Use only:

Seconder to Nomination

Full Name:

Signature: Date:/...../.....

Please return to Administration Officer, AADANT Inc., PO Box 220 PARAP NT 0804
or by email to admin@aadant.org.au

Nominee and Nominator must be current financial members of AADANT.