

NOMINATION FORM
NATURAL HEALTH PRODUCTS NEW ZEALAND INCORPORATED
EXECUTIVE BOARD 2021

This form provides for nomination for election as an Executive Board member of Natural Health Products New Zealand Incorporated

Nominee:

Name: _____

Mailing Address: _____

Company: _____

Position held with Company: _____

Phone: _____

Email: _____

Nominator: Name:/Signature: _____

Natural Health Products NZ
Full Member Company*: _____

Position held with Company: _____

Secunder: Name:/Signature: _____

Natural Health Products NZ
Full Member Name *: _____

Position held with Company: _____

Acceptance by Nominee

I accept nomination for election as a member of the Executive Board of Natural Products New Zealand Incorporated

Signature: _____

Name: _____

Date: _____

- * **All signatories on this nomination form must be current *full financial* members of Natural Health Products New Zealand Incorporated at the time of this nomination and at the subsequent AGM**
- * **Only one person from each member company may nominate and vote at the AGM**

Nominations for the positions to be actioned at the AGM are to be received by Natural Health Products NZ, via scanned email to kerry@naturalhealthproducts.nz, or post to PO Box 9026, Newmarket, 1149 to be received by **5pm Monday 12th April 2021**.

All nominations received will be acknowledged by email to the nominee.