



BC FERRY & MARINE WORKERS' UNION NOMINATION FORM Local Position

I, _____ **NOMINATE** _____
Please Print Name of **NOMINATOR** Please Print Name of **NOMINEE**

For the Position of: _____

For Local Number: _____

On Date: _____

Signature of **NOMINATOR**: _____

Date Signed: _____

I, _____
Print Name **Signature**

Accept Nomination for the position of _____

Witnessed by: _____
Print Name **Signature**

Date Witnessed: _____