



MOUNT PEARL SOCCER ASSOCIATION

P. O. Box 295, Mount Pearl, NL, Canada, A1N 2C3
Phone: (709) 364-9793 Fax: (709) 368-4981 Email: soccer@mpsa.ca

Nomination for the Board of Directors Mount Pearl Soccer Association

Date: ____/____/____

Nominee

Name: _____

Home Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Phone: _____ Email: _____

Position applying for: _____

Nominee's Declaration: I hereby give permission to the Mount Pearl Soccer Association to submit my name for the 2010 Annual General Election as noted above. I also confirm that the information contained in this nomination is correct and authorize the use of the same.

Signature Nominee: _____

Nominator

Name: _____

Home Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Phone: _____ Email: _____

Signature Nominator: _____

Seconder

Name: _____

Home Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Phone: _____ Email: _____

Signature Seconder: _____