

# NOMINATION FORM

Positions to be elected or appointed April, 2020.

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_

CHURCH (and City) \_\_\_\_\_

Position(s) suggested:

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Qualifications for the(se) area(s):

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\* \* \* \* \*

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_

CHURCH (and City) \_\_\_\_\_

Position(s) suggested:

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Qualifications for the(se) area(s):

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\* \* \* \* \*

Signature of person submitting nomination(s) \_\_\_\_\_

Church Affiliation of Nominator \_\_\_\_\_

PLEASE RETURN THE NOMINATION FORM BY MARCH 15, 2020 TO:

Northwest Ohio Association, 416 Wentz Street, Tiffin, OH 44883

or by emailing Joan Davidson [joan@nwoa.org](mailto:joan@nwoa.org)