



PA ELECTION NOMINATION FORM

To nominate yourself or someone else please provide the following information and submit it via email to laguardiahspa@gmail.com by _____

OR

Submit it when requested at the _____(date) PA meeting to be nominated from the floor.

Name _____

Email _____

Studio _____

Child's name _____

Address _____ Apt _____

City _____ Zip code _____

Telephone Number (preferred): _____

Position nominated for: _____

Slate you are running with for Co-Positions: _____

If none please indicate.

NOTE: All individuals running as a Slate must submit a nomination form.