



NOMINATION FORM MMHA

Name: _____

Telephone: _____ Email: _____

Position Sought: _____

Important dates of the election process:

- **Election Day February 21, 2017 @ 7 pm at NSSRC Bill Thompson Room**
- Please submit your nomination form to the Secretary of MMHA **prior to January 31, 2017 at 5pm**
- Please drop the completed forms in the MMHA secure drop box, located at NSSRC Customer Service counter – marked MMHA.
- **Nominees will be posted by February 10, 2017.**

Nominee Signature _____

Date _____