

NOMINATION AND CONSENT FORM

NOMINATION

We the undersigned, both of whom are either an Active or a Life Member of the Registered Massage Therapists' Association of Ontario, do hereby nominate

Print Name Clear	ly
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also an Active or Life Member of the Registered Massage Therapists' Association of Ontario, for the position of Director on the RMTAO Board of Directors.

Nominated by:

Print Name

Seconded by:

Print Name

Signature

Signature

Member No.

Member No.

CONSENT

I, ______, an Active or Life Member in the Registered Massage Therapists' Association of Ontario, do hereby accept the above nomination for the position of Director on the RMTAO Board of Directors and will serve if elected.

Signature

Member No.

This form must be completed and returned by email, mail or fax no later than 4:00 p.m. on Friday, November 4, 2022. Any nominations or consents received after that date and time will be considered invalid. Return to:

Registered Massage Therapists' Association of Ontario 1243 Islington Avenue, Suite 704 Toronto, ON M8X 1Y9 Email: info@rmtao.com Fax: (416) 979-1144