



**Irrigated Cropping Council**  
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## BOARD NOMINATION FORM

The members whose names appear as Nominator and Secunder, nominate –

**Name:** (Please print) \_\_\_\_\_

**Address:** \_\_\_\_\_

for election to the Board of Management of Irrigated Cropping Council Ltd for a **1-year term** as an  
**Ordinary Board Member**

**Nominator's Name:** (Please print) \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Secunder's Name:** (Please print) \_\_\_\_\_

**Signature:** \_\_\_\_\_

I accept the above nomination (Nominee to sign here): \_\_\_\_\_