



**National Board of Directors  
2016/2017 NOMINATION FORM/CANDIDATE PROFILE**

**Region: (Circle One)    Atlantic    Quebec    Ontario    Prairies    Alberta    British Columbia**

---

**Please Print/Type Information**

1. Candidate's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Business Phone: (    ) \_\_\_\_\_ Fax: (    ) \_\_\_\_\_  
E-mail: \_\_\_\_\_

2. Year joined CCA: \_\_\_\_\_

3. Areas of Expertise:  
\_\_\_\_\_  
\_\_\_\_\_

4. Comments:  
\_\_\_\_\_  
\_\_\_\_\_

**The Undersigned Candidate Hereby Agrees to Stand for Election as a National Director of CCA and, as a National member in good standing, agrees to comply with the *Canadian Carwash Association By-Laws*.**

Candidate's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**The Undersigned Member in good standing of CCA Hereby Nominates the Above Candidate.**

Nominator Name: \_\_\_\_\_ Company: \_\_\_\_\_  
Print