National Board of Directors
2018/2019 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