

This form is for authorisation for delegates of affiliated clubs and other organisations to attend the Annual General Meeting of the Swim England West Midland Region Limited and should be completed in *full*. The completed form should be presented to the Scrutineers on arrival at the meeting and exchanged for a delegate card.

Failure to complete the form correctly may lead to a delegate being disqualified from taking part and voting in the Annual General Meeting of the Swim England West Midland Region Limited.

PLEASE USE BLOCK CAPITALS

CLUB/ORGANISATION.....

DULY APPOINTED DELEGATE

ADDRESS.....

IF DULY APPOINTED DELEGATE IS UNABLE TO ATTEND PLEASE INDICATE NAME OF SUBSTITUTE ATTENDING

SUBSTITUTE

ADDRESS

I confirm that the delegate/substitute attending the Annual General Meeting of the Swim England West Midland Region Limited is a *bona fide* member of the above club/organisation and is authorised by the Club Committee to vote and take part in the meeting on behalf of that club/organisation.

CLUB/ORGANISATION SECRETARY.....

ADDRESS

SIGNED..... DATED

NOTE:

In the absence of the Secretary the above form may be certified by another officer of the club/organisation. If the signatory is not the Secretary, please indicate the position held by the confirming signatory.

DELEGATE CARD NO:

To be added by the Scrutineers

THIS FORM MUST NOT BE PHOTOCOPIED

If, for any reason, another form is required, please contact the Regional Office by email westmidland@swimming.org