

## National Independent Concessionaires Association, Inc. "Together We Can!"

## **Election Nomination Form**

Member Name:		NICA Member Number:		
Telephone:	Cell Phone:			
Address:	City:	State:	Zip:	
I hereby submit my name in nomination of Directors. As a nominee I agree to ab support NICA and agree to abide by all p	ide by the rules and regulations of t	he election procedure. If e	elected, I pledge to	
Signature:		Date:		
We, the undersigned, as current regular above named member to seek election tindicate our voting intentions, but does seek election to seek el	to the NICA Board of Directors. We	understand that signing the		
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Submit all materials by fax to (813) 803-8460, mail to 1043 E. Brandon Blvd. Brandon, FL 33511 or email to nominations@nicainc.org

COMPLETED FORM(S) AND MATERIALS MUST BE IN THE NICA OFFICE NO LATER THAN JU@M' \$TH

Nominees must also include a biography, photograph suitable for publication, answers to the four questions outlined on the Statement of Commitment, and the signed Statement of Commitment and Code of Ethics. Required signatures may be gathered either in person, by email, or by fax; due to the methods involved, additional signature sheets will be accepted.