

**DRESSAGE NZ**  
**Committee Representative Appointment Panel**  
**NOMINATION FORM 2024**



\_\_\_\_\_ |

National Committee Member/ Area Dressage Committee Secretary/Financial Member ESNZ.

hereby nominate Mr/Mrs/Ms/Miss \_\_\_\_\_

as

Dressage Committee Appointment Panel Member (one year term effective 8 July 2024)

for the ensuing term.

I hereby consent to the nomination:

Name: \_\_\_\_\_

Nominee to sign: \_\_\_\_\_

Proposer to sign: \_\_\_\_\_

Seconder to sign \_\_\_\_\_

Date nomination received: \_\_\_\_\_

Signature of Sport Manager: \_\_\_\_\_

The nominee's qualifications are as follows (attach a separate sheet if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nominations must be received by  
Sport Manager, no later than 5pm Friday 24<sup>th</sup> May 2024 email  
to: [dressage@nzequestrian.org.nz](mailto:dressage@nzequestrian.org.nz)