



Accredited Delegate Form

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|---|--|----------------|-------------|-----------|
| Event: | D7 District Virtual Teleconference | | Event Date: | 14 Jun 20 |
| Please submit this form to: | membership@district7kin.ca | | Deadline: | 25 May 20 |
| Failure to correctly complete and submit your form by the deadline means that your club is unable to vote. | | | | |
| ALL CLUBS, whether they are attending or not, MUST completely fill out this form in order to exercise their vote. The form is invalid if not completed correctly or if the writing is not legible. Please double check your entries before submitting. | | | | |
| SECTION 1: CLUB INFORMATION | | | | |
| Club Type (please V one): | <input type="checkbox"/> Kinsmen <input type="checkbox"/> Kinette <input type="checkbox"/> Kin <input type="checkbox"/> Campus | | | |
| Club Name and District | Club of | District: | Zone: | |
| SECTION 2: ACCREDITED DELEGATE INFORMATION | | | | |
| Accredited Delegate's Name: | | | | |
| Accredited Delegate's Club: | | | | |
| SECTION 3: ALTERNATE ACCREDITED DELEGATE(S) INFORMATION (in order of ranking) (Optional) | | | | |
| Alternate Accredited Delegate #1 Name: | | | | |
| Alternate Accredited Delegate #1 Club: | | | | |
| Alternate Accredited Delegate #2 Name: | | | | |
| Alternate Accredited Delegate #2 Club: | | | | |
| Alternate Accredited Delegate #3 Name: | | | | |
| Alternate Accredited Delegate #3 Club: | | | | |
| If the Accredited Delegate (AD) or Alternate Accredited Delegate(s) (ADD) are not from the club being represented, please ensure that: (Please check each box to confirm each) | | | | |
| <input type="checkbox"/> The delegates listed above agree to take on the AD or AAD role for your club. | | | | |
| <input type="checkbox"/> Your club understands that the delegates listed above may hold other club votes and may not hold your club vote in a show of hands vote. | | | | |
| <input type="checkbox"/> Your club has given voting instructions to the delegates listed above. | | | | |
| SECTION 4: CLUB CERTIFICATION | | | | |
| We, the undersigned (2 of the following positions – President, Vice-President, and Secretary) of the above named club, hereby certify that our club, at a regularly constituted meeting held on <div style="border: 1px solid black; width: 400px; height: 20px; display: inline-block;"></div> has voted to appoint the people named above as our Accredited Delegate and Alternate Accredited Delegate(s): | | | | |
| Name: | | Name: | | |
| Club Position: | | Club Position: | | |
| Signature: | | Signature: | | |
| Date: | | Date: | | |
| Please go through the checklist on page 2 before submitting your form. | | | | |

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