

<p><b>PCAV ZONE        REPRESENTATIVE        OFFICIAL NOMINATION FORM</b></p>
Date entered:

**NOMINATIONS CLOSE: WEDNESDAY 19<sup>TH</sup> AUGUST 2015**

**Nomination**

For the purpose of electing a Zone Representative to the PCAV Council for the year 2015 - 2016 and in accordance with the PCAV Purpose and Rules, we submit the following nomination:

Nominee name: ..... to the position of Zone Representative for ..... Zone.

Signed on the behalf of the ..... Pony Club

President/District Commissioner: ..... Date: ..... / .... / 2015

Secretary: ..... Date: ..... / .... / 2015

**Zone Representative – Roles & Responsibilities** - as stated in the PCAV Handbook of Bylaws

- ◆ As the co-ordinator between the Zone Clubs and State Council, the Zone Representative will work in close liaison with the Zone Executive, Zone Committee, Zone Chief Instructor, Deputy Chief Instructors, Zone Assistants and the Zone Examining Secretary.
- ◆ Is responsible to ensure that Pony Clubs within the Zone operate in accordance with the current PCAV rules and regulations.
- ◆ Represent the Zone’s Pony Clubs at State Council Meetings, State Competitions and other State meetings.
- ◆ Endorse nominations and entries of Pony Club members for all State, Interstate and National level occasions.

Together with the Zone executive or their appointee/s, provide advice and guidance to Clubs and assist with the resolution of domestic problems and issues.

*For a detailed Role Description go to the PCAV website, phone 8685 8925 or email [executiveofficer@ponyclubvic.org.au](mailto:executiveofficer@ponyclubvic.org.au)*

**Nomination Acceptance**

In accepting this nomination I, the undersigned agree to undertake the Roles & Responsibilities of the Zone Representative as outlined in the Position Description. I understand my obligation and accept the nomination for election to the PCAV Council as Zone Representative for:

Zone: .....

Nominee’s signature: ..... Date: ..... / .... / 2015

**THIS FORM IS CONSIDERED INVALID IF THE NOMINEE DOES NOT SIGN IT.**

Please forward this form to: <b>PCAV State Office</b> <b>73-75 Mackie Rd</b> <b>MULGRAVE, VIC. 3170</b>	
Version: Nomination - State Councillor - Zone Representative.doc	H:\PCAV Files\Committees, State Council and AGM\State Council\AGM & Annual Report\2015\Nomination - State Councillor - Zone Representative.doc
Date Received:	