

Mareeba Shire Council  
ADVISORY COMMITTEE  
REPRESENTATIVE NOMINATION FORM

Kuranda Community Precinct  
Advisory Committee

Community Representative

NOMINEE DETAILS:

TITLE

FIRST NAME

SURNAME

Representation Group (if applicable)

Individual/Group/Committee Endorsing Applicant (if applicable)

Postal Address

TOWN

STATE

POSTCODE

PHONE:

FAX:

EMAIL:

Mareeba Shire Council, I wish to nominate as a representative on the above Advisory Committee.

Other comments to support my nomination (if applicable): (If there is insufficient room – please attach separate document)

Signed:

Date: / /

NOMINATION FORM TOGETHER WITH ATTACHED DOCUMENTS TO BE  
RECEIVED BY MAREEBA SHIRE COUNCIL:

4.30pm Friday, 29 April 2014

Please return to: Glenys Pilat  
Manager, Community Wellbeing  
Mareeba Shire Council  
PO Box 154 Mareeba Qld 4880

Ph: (07) 4086 4605  
Fax: (07) 4092 3323  
Email: info@msc.qld.gov.au

THANK YOU FOR YOUR VALUED SUPPORT