

DIRECTOR NOMINATION FORM

THIS FORM CAN BE E-MAILED (to info@obsid.org.za) OR DELIVERED BY HAND AND MUST BE RECEIVED BY THE OBSID OFFICE BY 16H00 ON SUNDAY 15TH OCTOBER 2023.

THIS FORM MUST BE ACCOMPANIED BY A SHORT BIOGRAPHY TO BE SUPPLIED BY THE NOMINEE.

Name of nominee:		

I, (full name) hereby confirm my willingness to act as a Director of the Observatory Improvement District NPC, if elected.

Nominee's signature: Date:

OBSID member name:	
Address:	
Erf. Number:	
Mobile phone:	
Landline:	
Email address:	



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