

Irrigation Australia Regional Committee Nomination Form

Section 1: Nominee Details
Full Name:
Organisation/Business:
Position/Role:
Phone Number:
Email Address:
Irrigation Australia Membership Number (if known):
Section 2: Nomination
I, the undersigned (the *Nominator*), nominate:
Nominee's Name:
for election to the Victorian Regional Committee of Irrigation Australia Ltd for 2025/26 term.
Nominator's Full Name:
Nominator's Membership Number (if known):
Nominator's Signature: Date:
*Note: The Nominator is the person putting forward the candidate for election. They must be a
current, financial member of Irrigation Australia. *



Section 3: Seconder

I, the undersigned (the *Seconder*), second the above nomination:		
Seconder's Full Name:		
Seconder's Membership Number (if known):		
Seconder's Signature:	Date:	
Note: The Seconder is a second member wh current, financial member of Irrigation Austr	no supports the nomination. They must also be a alia.	
Section 4: Nominee Acceptance		
I,to serve on the Victorian Regional Committe	(Nominee), accept this nomination and agree e of Irrigation Australia Ltd if elected.	
Committees and/or Sub-Committees I am int more than one):	terested in serving on (please tick, you may select	
Executive		
Events		
Training		
Other:	-	
Position(s) I am interested in standing for (pl	ease tick one):	
Chair		
Deputy Chair		
Secretary		
Member		



I confirm that:

- I am a current financial member of Irrigation Australia.
- I understand the responsibilities of serving on the Regional Committee.
- I agree to act in the best interests of Irrigation Australia and its members.
- I will uphold the Irrigation Australia Regional Committee Charter.

Nominee's Signature:	Da	ate:

Submission Instructions

Completed nomination forms must be returned by Friday, 31 October 2025 to:

rebecca.new@irrigation.org.au