ONTARIO CHAPTER

Nominations Form

I nominate _____
(Please insert name and company) as a **Director of the AWMAC-Ontario Chapter**

I nominate _____
(Please insert name and company) as a **Director of the AWMAC-Ontario Chapter**

I nominate _____
(Please insert name and company) as a **Director of the AWMAC-Ontario Chapter**

Please ensure that you have spoken with the person you are nominating and that they are willing to serve.

_____ _____
Your Name **Company**

Please return no later than **February 3, 2017** to:

Architectural Woodwork Manufacturers Association of Canada – Ontario Chapter
146 Adesso Drive, Suite 1
Vaughan, Ontario L4K 3C3
Telephone: 844 ON AWMAC (844-662-9622)
gis@awmacontario.com
http://on.awmac.com/