

# Nomination 2017 – Issued August 2017

Please indicate the post(s) for which you have been nominated:

Doctor Representative

Physiologist Representative

**Nominee Name(s):**.....

**Surname:**.....

**Address:**.....

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.....

.....

.....

**Postcode:**.....

**Email:**.....

**Tel:**..... **Fax:**.....

**In the section below, please give a brief summary (maximum of 250 words – please attach a separate file if necessary) of why you should be elected and your aspirations for the Society.**

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**SIGNED:**.....

**Name:** ..... **Date:**.....

Please return this form by email to [admin@bhers.com](mailto:admin@bhers.com) by 5pm, Friday 8<sup>th</sup> September 2017. As proof, please note that papers must be returned with the original handwritten / scanned signatures. We will not accept papers with typescript signatures.  
**Nomination 2017 – Issued August 2017**

*Please note: Proposer and Seconder must be **current** British Heart Rhythm Society members*

**Nominee (Block Capitals):**.....

We nominate the above person for the post of:

**Doctor Representative**

**Physiologist Representative**

**Proposed by:**..... **Signature:**.....

**Seconded by:**..... **Signature:**.....

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**BHRS Elections 2017.**  
**British Heart Rhythm Society**  
Unit 6B,  
Essex House, Cromwell Business Park,  
Chipping Norton,  
OX7 5SR.

**Please note that the acceptance of nomination form must be completed by the nominee and returned, if necessary separately, by the above date.**