GUJARATI CULTURAL ASSOCIATION OF BAY AREA

(A NON-PROFIT ORGANIZATION ESTABLISHED IN 1979)

NOMINATION FORM
DIRECTOR POSITION FOR THE YEARS 2014-2015 & 2015-2016

Name of the Candidate : _____
First MI Last

Address: _____

City: _____ State: _____ Zip: _____

Telephone: Home _____ Work _____

Email:_____

Membership # _____ Member since _____

I undersigned, candidate for the position of Director hereby declare and agree that:

1. I will not withdraw my nomination form without approval of Election Committee Chairman.
2. I am familiar with the articles of incorporation and by-laws of GCA and pledge to abide by them.
3. I will work for the best interest of the membership of GCA.
4. I can contribute as Director as mentioned below.

_____
_____
_____
_____
_____

Note:
To qualify for Director position, minimum one year (twelve months) of GCA membership is required.

Signature of Candidate: _____ Date: _____

Mail completed forms to:

Kanu Gandhi
46821 CLOVERLEAF CT
Fremont, CA 94539

Deadline for filing of this application is August 31, 2014