



# ONTARIO ABORIGINAL LANDS MANAGERS ASSOCIATION

## VOTING MEMBER NOMINEE APPLICATION

Please complete, sign and send this form by email to the OALA Executive Director, Jessica Pickett (ed@oala-on.ca) or by mail to Ontario Aboriginal Lands Association, 9119 West Ipperwash Road, Unit B, Kettle and Stony Point First Nation, Ontario N0N 1J1.

Date: \_\_\_\_\_

### **Voting Member Information (First Nation):**

Name of Voting Member:

\_\_\_\_\_

Mailing Address of Voting Member:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **Nominee Information:**

Nominee **Full Legal** Name (usually the Lands Manager/Tech, etc.):

\_\_\_\_\_

Nominee Title/Position with the Member:

\_\_\_\_\_  
(For Example: Lands Manager or Lands Technician, etc.)

Nominee **Home** Mailing Address (required by Government of Ontario):

\_\_\_\_\_  
\_\_\_\_\_

Nominee **Work** Telephone No. \_\_\_\_\_

Alternate Telephone No. \_\_\_\_\_

Email address: \_\_\_\_\_

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**CONDITIONS OF NOMINATION:** (please check in box to right)

The Voting Member hereby confirms and agrees that that the Nominee, if accepted by the OALA Board, has the same rights as the Voting Member, including the right to speak at a meeting of members in respect of any matter, to vote by way of show of hands or ballot at the meeting, to demand a ballot at the meeting and to vote at the meeting by way of a show of hands	Agree <input type="checkbox"/>
The Voting Member agrees that a nominee remains as a representative of the Voting Member until the nominee resigns or is removed by the Voting Member or the Board or Membership of OALA	Agree <input type="checkbox"/>
The Voting Member confirms that the Nominee may serve as a Director and/or Officer of the Board of Directors of OALA if appointed or elected.	Yes <input type="checkbox"/> No <input type="checkbox"/>
The Voting Member understands that any nominee must abide by the objectives and goals of OALA, the conditions of membership, all By-laws and Policy of OALA and if, in the opinion of the Board the Nominee does not do so, the Board may remove the Nominee as a representative of the Voting Member in accordance with OALA By-laws and Policies.	Agree <input type="checkbox"/>
The Voting Member agrees to supports its Nominee by providing funding (if required) and time off work to meet the Voting Member's obligations to OALA.	Agree <input type="checkbox"/>
The person signing has the legal authority to bind the Voting Member (i.e. the First Nation) to this Application	Agree <input type="checkbox"/>

**SIGNATURE ON BEHALF OF VOTING MEMBER:**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\_\_\_\_\_  
Print name of person signing above:

\_\_\_\_\_  
Print Office/Position held with Voting Member (i.e. First Manager, Lands Manager)

**SIGNATURE OF NOMINEE**

I hereby confirm and agree to accept the position as a Nominee of the Voting Member and I understand and agree that I am at all times obligated to represent the interests of the Voting Member and to serve under the director of the Voting Member. I further agree to be bound by and to abide by the By-laws, Policies and Rules and Regulations of OALA as amended from time to time. I understand that this appointment may be revoked by the Voting Member at any time.

**I hereby accept the appointment as Nominee as set out above.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**OFFICE USE ONLY**

**Date Complete Application Received:** \_\_\_\_\_

**Date Approved by Board:** \_\_\_\_\_

**Resolution No.** \_\_\_\_\_

**Resolution Date:** \_\_\_\_\_