



Nomination to the OCA Board of Directors is open to any OCA voting member in good standing for at least three consecutive years in accordance with the OCA bylaws.

NOMINEE:

_____ (please print name)

I accept the nomination to the position of Director of the Ontario Chiropractic Association. If elected, I agree to serve and abide by the [Conflict of Interest](#), [Confidentiality](#), and [Director and Officer Online Presence](#) policies found on the OCA [website](#).

Signature of Nominee: _____ Date: _____

Nominators

We, the following voting members in good standing, nominate this member for election to the OCA Board of Directors and confirm that we have not signed another candidate member nomination form:

Print Name	Signature
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

Please complete and return this form, with signatures, by Monday, November 22, 2021 at 5 p.m. by mail:
Governance & Nominating Committee, Ontario Chiropractic Association
70 University Avenue, Suite 201
Toronto, Ont., M5J 2M4
Or by fax: 416-860-0857
Or by email: governance@chiropractic.on.ca