



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 By-laws.

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 of 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 I 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 Friday, November 25, 2022; 5 p.m.

to: Governance Committee, Ontario Chiropractic Association
70 University Avenue, Suite 201 Toronto ON M5J 2M4
Or by Fax: 416-860-0857 or Email: governance@chiropractic.on.ca