

NOMINATION FORM

2019-2020 BOARD OF DIRECTORS QUÉBEC ABORIGINAL TOURISM



I HEREBY WISH TO APPLY FOR A POSITION ON QAT'S BOARD OF DIRECTORS.

Member enterprise
OR organization

Member
Category

Active

Associate

Delegate

Full name

Occupation

Address

Telephone

Email

Signature

I WILL BE PRESENT AT THE AGM

I WILL BE ABSENT AT THE AGM - MY NOMINATION WILL BE PRESENTED BY:

2019-2020 elections: 5 seats are up for election

- Active members: 3 seats are up for election
- Delegate members: 1 seat is up for election
- Associate members: 1 seat is up for election

QUEBEC ABORIGINAL TOURISM

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