



# ***Yukon Registered Nurses Association***

204 – 4133 – 4th Avenue, Whitehorse, Yukon Y1A 1H8  
Phone 867-667-4062 Fax 867-668-5123 E-mail admin@yrna.ca Web www.yrna.ca

## **NOMINATION FORM**

DATE: \_\_\_\_\_

I, \_\_\_\_\_, agree to run for the position of

Given Name

Surname

\_\_\_\_\_ on the Board of the Yukon Registered

Nurses Association.

### **NOMINEE:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

### **NOMINATED BY:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

### **ALL NOMINATIONS MUST:**

- be for a Registered Nurse resident in the Yukon
- be made by a Registered Nurse
- include the signature of both the nominee and the nominator
- be received by February 1st

### **PLEASE SEND THE COMPLETED FORM TO:**

YRNA Nominations Committee  
c/o the YRNA office at the address above.