

SASCRO Executive Nomination Form

To be faxed to **0866769081** or e-mailed to office@sascro.org by **19 July 2019**.

I _____, declare that I am a paid-up full member of the South African Society of Clinical and Radiation Oncologists (SASCRO) and therefore qualified to propose the following nomination for appointment to the SASCRO Executive Board as:

Select One: Public Sector Representative []
 Private Practice Representative []

Acceptance of Nominee

Full name of Nominee: _____

Signature of Nominee: _____

Full name of Proposer: _____

Signature of Proposer: _____

Full name of Seconder: _____

Signature of Seconder: _____

Date: _____