**Nomination for elected committee member**

Thank you for your interest in becoming a committee member and offer of support for the group. As you are aware this is a voluntary role and as committee member you become a trustee for our registered charity.

Elected committee members are required to attend a minimum of 60% of committee meetings per year. Typically these are held at 12:30 on the same day as our events.

|  |  |
| --- | --- |
| Name |  |
| Email |  |
| Company |  |
| Telephone No |  |
| Alternative contact number |  |
| No of years as a member |  |
| Professional membership / Member of other groups |  |
| Brief summary of experience |  |
| Particular skills you believe you can bring to the group |  |
| \*Address |  |
| \*D.O.B. |  |

I have read and understood the constitution, the policy on committee responsibilities and the policy on data protection. (All available from our website)

Signed Date

|  |  |
| --- | --- |
| Nominated by: | Nomination supported by: |

\* Required by charities commission

Please return to the chair @ [londonhealthandsafetygroup@gmail.com](mailto:londonhealthandsafetygroup@gmail.com)