



Application form for Council Member for 2020 - 2021

(1 year post) of the Chaplaincy Council of All Saints Amersfoort

Person to be Nominated: Full Name (PLEASE PRINT).....

Signature.....

Date.....

(Nominated person must be on the Electoral Roll)

Person nominating: Name.....

Signature.....

Date.....

Secunder: Name

Signature

Date.....

(All signatories must be on the Electoral Roll). Please return form to a church warden

