



1201 Appleby Line
Burlington, ON L7P 3N9
905.319.0866

NOMINATION FORM BOARD OF DIRECTORS BURLINGTON SKATING CENTRE

Name:	_____
Address:	_____
Phone Number:	_____
Email Address:	_____
Occupation:	_____

Areas of Interest: (Related to Positions of the Board)

List Reasons why you are interested in becoming a member of the BSC Board of Directors:

****Must Submit Nomination form to the BSC office by close of day May 21st, 2022**