NOMINATION FORM

We, the undersigned, being community members within the LICA region, nominate:

_____

(name of candidate)

Of _____

(location)

To be a candidate at the elections on November 18, 2026, for the position of

COMMUNITY DIRECTOR

☐ **ONE-YEAR TERM**

☐ **TWO-YEAR TERM**

_____	_____
(Nominator)	(Seconder)
_____	_____
(Name—printed)	(Name—printed)
_____	_____
(Address)	(Address)

CANDIDATE'S ACCEPTANCE

I,_____, candidate, confirm that I am a member in good standing of LICA and, if elected, I will accept the office for which I am nominated. I also agree to abide by LICA's Vision, Mission and Values.

_____	_____
(Signature of candidate)	(Date)