

TAFCE WESTERN REGION
Regional Officers Nomination Form

Regional Office to be nominated for _____

Name _____

Address _____

City _____ Zip _____ County _____

Local Club Offices Held (Please place the number of years by offices you have held.)

_____ President _____ Vice President _____ Secretary
_____ Treasurer _____ Educational Chairman (area) _____

County Council Offices Held (Please place the number of years by offices you have held).

_____ President _____ Vice President _____ Secretary
_____ Treasurer _____ Educational Chairman (area) _____

Number of times you have attended:

_____ Mini Conference (Annual Meeting) _____ State Conference

Club, County or Regional Special Activities (Cultural Arts, Fashion Revue. etc.)

Assisted with other FCE projects (list)

Other FCE Related items or events (list)

If elected to this office, I agree to serve and conform with the bylaws of the Western Region.

Date

Nominee Signature