**Jaguar Clubs Of North America, Inc**.

**Nomination for Regional Director Form**

(Open this form and press the **Tab** key to move through the fields and type the information in. Print and sign the document and send **by AUGUST 15th to both:**

|  |  |
| --- | --- |
| **JCNA Nominations Chair**  **Lisa Schafer**  [lmvschafer@yahoo.com](mailto:lmvschafer@yahoo.com)  **324 Flightline Road**  **Lago Vista TX 78645**  **(512)656-8262**  **Committee: Lisa Schafer, Howard Lee Smith and Nicole Smart.** | **JCNA Administrator**  **Admin@JCNA.com**  **500 Westover Dr. #8354**  **Sanford, NC. 27330**  **888-258-2524 #1 FAX**  **ALSO submit BIO & Self-photo to P. Crespin at** [Pc@thewritersbureau.com](mailto:Pc@thewritersbureau.com) **for inclusion in JAGUAR JOURNAL**. |

This nomination is submitted in accordance with Article VI of the JCNA Bylaws.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Nominee (Print name)**: | | | | |  | | | | | | | | | | |
| |  |  |  | | --- | --- | --- | | JCNA # |  |  | | | | | | | | | | | | | | | | | |
| Nominee is currently a member of (Club): | | | | |  | | | | | | | | | | |
| a JCNA affiliate, and is nominated to represent the | | | | | | |  | | | | (NW,SW,NC,SC,NE,SE) Region. | | | | |
| **(1) This nomination is in the name of club affiliate #** | | | | | |  | | | | and bears the names, titles, | | | | | |
| JCNA numbers, and signatures of two of the club affiliate’s officers: | | | | | | | | | | | | | | | |
| **Name of 1st Sponsor**: | |  | | | | | | | | | | | | | |
| Title: | |  | | | | | | | | | JCNA # | |  | |
| Signature: | |  | | | | | | | | | | | | | |
| Email: | |  | | | | | | Phone No: | | | |  | | | |
| **Name of 2nd Sponsor**: | |  | | | | | | | | | | | | | |
| Title: | |  | | | | | | | | | JCNA # | |  | | |
| Signature: | |  | | | | | | | | | | | | | |
| Email: | |  | | | | | | Phone No: | | | |  | | | |
| **OR (2)** **I hereby nominate the above named member to run for the Regional Director position in my Region.** | | | | | | | | | | | | | | | |
| **Name of Sponsor**: |  | | | | | | | | | | | | | | |
| JCNA Club: |  | | | | | | | | | | JCNA # | |  | | |
| Signature: |  | | | | | | | | | | | | | | |
| Email: |  | | | | | | | Phone No: | | | |  | | | |
|  |  | | | | | | |  | | | |  | | | |
| **If elected, I (Print Name)** | | | |  | | | | | | | | | | | |
| **agree to serve and fulfill the duties of a Regional Director as set forth in the JCNA By-laws, including attending Board meetings and AGMs. I certify that I have been a member of JCNA in good standing for more than 12 months.** | | | | | | | | | | | | | | | |
| **Signature of Nominee**: | | |  | | | | | | | | | | | | |
| Phone Number: | | |  | | | | | | Fax No: | | |  | | | |
| Email: | | |  | | | | | | Cell No: | | |  | | | |
| Postal Address: | | |  | | | | | | | | | | | | |
| City, State, Zip: | | |  | | | | | | | | | | | | |
| Date submitted: | | |  | | | | | | | | |  | | | |