State Committee Nomination Form

Nomination for election under Clause 9 of the State Committee Charter

Full name	
DSA Member No. (CID)	
Email address	
Mobile	
Home State	

I wish to submit my nomination for election as a **State Committee Member** of the following State Committee:

☐ New South Wales
☐ Victoria
☐ Queensland
☐ South Australia
☐ Western Australia
☐ Tasmania

Eligibility Declaration — I confirm that, as at the date of this nomination:

☐ I am a financial member or a life member of DanceSport Australia (DSA), registered in the State named above.
☐ I have not been expelled or suspended from membership of DSA.
☐ I am not in breach of any DSA by-laws, policies or codes of conduct.
☐ I have not served ten (10) consecutive years (from 2026) on a State Committee without a two-year break.
☐ I have read the State Committee Charter and, if elected, I will provide the signed **State Committee Member Consent to Act and Code of Conduct Acknowledgement** before taking office.

Brief statement in support of your nomination (optional, may be read at the State General Meeting):

Signed: _____ Date: _____

Nominations may be submitted by the nominee and do not need to be seconded. Nominations must be returned by email to your **State Returning Officer** no later than **three weeks (21 days) prior** to the State General Meeting. If no Returning Officer or other person is named to receive nominations, they may be sent to the DSA General Secretary at gensec@dancesport.org.au. Nominations received after the closing date cannot be accepted.