

**CHTF Board Nomination Form**

**Please complete and sign the following Board Nomination Form and submit it to:**

**Alain Gélinas,**  
**CHTF Communications Director**  
**120-2905 montée Hamilton, Sainte-Julienne, Qc J0K2T0 or**  
**Email: [communications@chtf.ca](mailto:communications@chtf.ca)**

\_\_\_\_\_  
Name of nominee Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Home telephone Work telephone

\_\_\_\_\_  
E-mail address Fax number (if applicable)

***In addition to completing this form, please let us know a little about you***

1. **What has motivated you to join the CHTF Board?** Feel free to tell us a little about why you are interested in serving on the CHTF BOD.

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2. **Your background?** Have you ever served on a volunteer BOD? Have you completed any Healing Touch Courses?

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3. **What skills do you feel you have to offer the Board?**

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Signature

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Date