



# South West Trillium Hunter Jumper Association

## Proxy Form

*Proxy form must be submitted to a member of the Board of Directors at least two (2) business days prior to the meeting.*

I \_\_\_\_\_ (Name) of

\_\_\_\_\_ (Address)

being a current member of the South West Trillium Zone, hereby authorize

\_\_\_\_\_ (Name) of

\_\_\_\_\_ (Address)

to act on my behalf at the \_\_\_\_\_ (Date)

Annual General Meeting.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

2024 THJA Membership #: \_\_\_\_\_

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*Office Use:*

Received and recorded on \_\_\_\_\_ by \_\_\_\_\_

SWTHJA Representative Signature: \_\_\_\_\_