

PALMERSTON ANIMAL MANAGEMENT REFERENCE GROUP

Please complete this nomination form for membership to the City of Palmerston Animal Management Reference Group.

Name:	
Surname:	
POSTAL ADDRESS	
Postal Address:	Residential Address:
CONTACT DETAILS	
Suburb:	Postcode:
Home Telephone:	Mobile:
Business Hours:	
Email:	
What is your reason for wanting to nomi	nate for membership to the Animal Management
Reference Group ?	

The City of Palmerston complies with the information Privacy Principles contained in the *Information Act* (NT). These principles protect the privacy of personal information collected and held by Council. Council's privacy statement is available from the City of Palmerston, Civic Plaza, 1 Chung Wah Terrace, or via our website on <u>www.palmerston.nt.gov.au</u>.



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Do you have any special needs to be taken into account by Council for you to comfortably
attend and participate in meetings?
If Yes, please explain:
Name:
Signature:
Date:

Note: All meetings are held in physically accessible premises Membership will require acceptance of Terms of Reference and Membership

Please forward your nomination form to City of Palmerston via:

 In Person: Level 1, Civic Plaza, 1 Chung Wah Terrace, Palmerston 	🛿 palmerston@palmerston.nt.gov.au	
☑ PO Box 1 Palmerston NT 0831	8935 9922	a 8935 9900

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