2026 NOMINATION FORM

Office of Director, *Canada's National Firearms Association*

Candidate Information

Full Name: _____ NFA Membership Number: _____

Address: _____ Date of Birth : _____

Phone: _____ E-Mail: _____

Candidate Profile

The candidate must provide a good quality digital photograph and a typed electronic 200 word biography that outlines his or her experience and reasons for wishing to serve as a Director of Canada's National Firearms Association.

- How long have you been a member of Canada's NFA?: _____
- Do you have power under Canadian law to sign legally binding contracts? ☐ ***Yes*** ☐ ***No***
- Do you have a criminal record for which you have not received a pardon? ☐ ***Yes*** ☐ ***No***

☐ I accept the nomination to run as a director for Canada's National Firearms Association.

Candidate's signature: _____ Date: _____

Nominators (2)

We the undersigned members in good standing of Canada's National Firearms Association wish to nominate _____ for the position of Director.

Nominator #1

Full Name: _____ NFA Membership Number: _____

Address: _____ Phone: _____

E-Mail: _____ How long have you known the candidate? _____

Nominator's signature: _____ Date: _____

Nominator #2

Full Name: _____ NFA Membership Number: _____

Address: _____ Phone: _____

E-Mail: _____ How long have you known the candidate? _____

Nominator's signature: _____ Date: _____

PLEASE RETURN FORM TO: Canada's National Firearms Association 9683 — 45 Ave, Alberta T6E 5Z8 **FAX:** 780-439-4091 **EMAIL:** info@nfa.ca