Grafton Jacaranda Festival Inc.

GRAFTON NSW AUSTRALIA - "JACARANDA CITY"



2019 JACARANDA QUEEN CANDIDATE

NOMINATION

WE,	(tradi	ing name of sponsoring organisation)
HEREBY I	NOMINATE	(full name of candidate)	
SIGNED_	(organisation representative)	POSITION	
DATE	PHONE	EMAIL	
l,	ull name of candidate)	USUALLY CALLED_	(preferred name of candidate)
	mination as a Jacaranda Queen n and agree to abide by the rule	n Candidate and assert that I have re es of participation.	ad and understood the conditions o
DATE OF BIRTH		YEARS LIVED IN CLARENCE VALLEY	
ADDRESS	;	(candidate residential address)	
MOBILE _	WORK _	EMAIL	
SIGNED_	(candidate)	DATE	

Please email this completed form with a copy of your drivers license / proof of age card to the Jacaranda Queen Candidate Director, Leanne Smith: **Email: lsmith@cranes.org.au**

The Jacaranda Queen Candidate Director will be in contact with you, to answer any questions you may have.