



**ANZCA**  
FPM

## NOMINATION FORM FOR 2026-2028 ANZCA NEW ZEALAND NATIONAL COMMITTEE

We wish to nominate the following fellow of the Australian and New Zealand College of Anaesthetists as a candidate for election to the 2026-2028 ANZCA New Zealand National Committee.

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(College ID Number)

\_\_\_\_\_  
(Date)

**I consent to act, if elected:**

\_\_\_\_\_  
(Signature)

### Nominators

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(College ID Number)

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(College ID Number)