



PROXY FORM

I, _____ of _____

being a member and fellow (FANZCA/FFPMANZCA) of the Australian and New Zealand College of Anaesthetists hereby appoint

_____ of _____

or failing them

_____ of _____

as my proxy to vote for me on my behalf at the annual general meeting of the college to be held on Monday 4 May 2026 and any adjournment thereof.

Item No.	Resolutions	For	Against	Abstain
1	Annual Financial accounts and Auditor's Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signature	
Name	
Date	

NOTE:

In the event of the fellow desiring to vote for or against any resolution they shall instruct their proxy accordingly. Unless otherwise instructed, the proxy may vote as they think fit.

Appointments of proxy must be received by the Chief Executive Officer no later than 48 hours prior to the commencement of the meeting and should be emailed to CEO@anzca.edu.au

Further queries can be directed to the ANZCA Corporate Office by email to CEO@anzca.edu.au