Australian Time Trials Association Inc Appointment of proxy

Rule 4(6) and (7)

Member				
Name:				
Address:				
Proxy				
Name:				
Address:				
Meeting	□ AGM □ Special general me	eeting	Date:	
Directions to pro	oxy (if any)			
Resolution (Insert Agenda number and brief description)				
	t Agenda number and brief description)	For	Against	As proxy thinks fit
	t Agenda number and brief description)	For	Against	As proxy thinks fit
	t Agenda number and brief description)			
	t Agenda number and brief description)	0		
Signature of me	t Agenda number and brief description)			