
**Marlborough Civic Theatre Trust
Nomination for Local Hirer
Representative Trustee 2025 - 2028**

Organisation Name: _____

Contact Phone: _____ Date: ____ / ____ / ____

Nominee Details

Name: _____

Phone: _____

Email: _____

Address: _____

Declaration

I, the above-named nominee, accept my name being put forward to the Appointment Committee for consideration to represent the Local User Groups at the Marlborough Civic Theatre Trust Board

Signature: _____

Please email the completed form to:

Email: ceo@mctt.co.nz

Subject Line: Nomination for Local Hirer Representative