



Australian Business Number: 23 676 617 704

2017 PROXY FORM

The President

Australian Injury Prevention Network (Inc)

I,

being a financial member* of the Australian Injury Prevention Network (Inc) hereby appoint

as my proxy to vote for me and on my behalf at the Annual General Meeting of the Australian Injury Prevention Network, to be held on the 13th November 2017 and at any adjournment thereof

Signed

Date:

** Only financial individual members and the delegated representative of organisational members are eligible to vote or appoint a proxy to vote on their behalf*

- ☐ My Proxy may vote **in any way they think fit**.
- ☐ My Proxy is required to vote in **favour** of any resolution.
- ☐ My Proxy is required to vote in **against** any resolution.

Please tick whichever is applicable.

The completed Proxy form must be received by the AIPN Secretariat prior to the commencement of the AGM.

It may be:

- Emailed to secretariat@aipn.com.au
- OR
- Handed to the President prior to the commencement of the AGM

Australian Injury Prevention Network (Inc)
Secretariat
C/- Director, Injury Division
The George Institute for Global Health
PO Box M201 | Missenden Rd | NSW 2050 Australia