



**Pembina Active Living (55+)**  
**Nomination Form - 2025-26 Board of Directors**

Name \_\_\_\_\_

Email \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

1. Please indicate your relevant volunteer experience with non-profit organizations and/or Boards

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2. Please indicate your knowledge, expertise and skills that would be useful in helping to govern PAL (55+), either volunteer or work-related

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3. Why do you want to serve on the Board of Pembina Active Living (55+)?

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4. Availability for meetings: Daytime \_\_\_\_\_ Evenings \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Nominator (if applicable) \_\_\_\_\_ Date \_\_\_\_\_