

Board Election Nominee Statutory Declaration

Oaths Act 1900 (NSW), 9th Schedule

I (name of declarant)

of (residence)

do hereby solemnly declare and affirm that:

- 1 I am the person nominated for office as a director of Forster Tuncurry Golf Club in the attached nomination form. Tick
- 2 I am not an undischarged bankrupt
- 3 I have not executed a Deed of Arrangement under Part X of the *Bankruptcy Act*, the terms of which have not been fully complied with.
- 4 I have not entered into a composition with my creditors under Part X of the *Bankruptcy Act* whereby a final payment has not been paid.
- 5 I have not had a personal representative or Trustee appointed to administer my estate under the provision of any legislation relating to protected persons.
- 6 I am not disqualified from managing a corporation under the *Corporations Act*.
- 7 I am not disqualified from being a director of a registered club pursuant to any order or declaration made by the Licensing Court of New South Wales.
- 8 I am not a key official* or former key official* as those terms are defined in the *Registered Clubs Act*.
- 9 I acknowledge that the principal statutes governing the duties of directors of registered clubs are: the *Registered Clubs Act*, the *Corporations Act* and, in the case of Co-operatives, the *Co-operatives Act*.
- 10 I acknowledge that there are other pieces of legislation which may impact on my duties and responsibilities as a director
- 11 These include but are not limited to the *Industrial Relations Act*, the *Occupational Health & Safety Act*, the *Anti-Discrimination Act* and the *Trade Practices Act*.

[the facts to be stated according to the declarant's knowledge, belief, or information, severally]

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And I make this solemn declaration, as to the matter (or matters) aforesaid, according to the law in this behalf made and subject to the punishment by law provided for any wilfully false statement in any such declaration.

Declared at (place)

on (date)

Signature of declarant

in the presence of an authorised witness, who states:

I (name of authorised witness)

Qualification of authorised witness

certify the following matters concerning the making of this statutory declaration by the person who made it: [*please cross out any text that does not apply]

- 1 *I saw the face of the person OR *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and

- 2 *I have known the person for at least 12 months OR *I have confirmed the person's identity using an identification document and the document I relied on was (describe identification document relied on)

Signature of authorised witness

Date
