

Annual General Meeting

Bishop Ryan Alumni Association

PROXY FORM

This form must be handwritten by the voting member assigning the proxy

I hereby authorize _____ to serve as my proxy
and to

vote on my behalf at the
_____ meeting

to be held on Tuesday, October 25, 2016.

This proxy is valid for: (check off)

1. _____ All matters voted on at the meeting

2. _____ Specific Issue/Matter (please describe)

3. For the nomination and/or vote for the candidate named below:

a) _____

Candidate's Name Position

b)

Candidate's Name Position

c)

Candidate's Name Position

d) _____

Candidate's Name Position

e)

Candidate's Name Position

f)

Candidate's Name Position

g)

Candidate's Name Position

Name:

Signature: _____ Date:

Give the completed proxy form to a member who will be attending
the AGM or email it to bishopryanalumniassociation@gmail.com or
mail it to the School "Attention: BRAA Registrar"