



**Chicken
Farmers
of Ontario**

**FRESH
IDEAS,
GROWING
TOGETHER**

Willingness to Stand Form

This form is only to be completed should you be unable to attend the nomination meeting for the District in which you wish to stand.

I am willing to have my name placed in nomination for:

Board of Directors

District Committee Representative

Name: _____ Producer No. _____

Signature: _____

Address: _____

City, Prov., Postal Code: _____

Telephone: _____ Fax: _____

Email: _____

Please complete this form and send to CFO Head Office by email or fax three (3) business days prior to the nomination meeting in your respective District.

Attn: *Tessa Christie*
Email: tessa.christie@ontariochicken.ca
Fax: 905.637.3464

****The Farmer-Member must abide by the terms of eligibility***