**HARM REDUCTION AUSTRALIA**

**APPOINTMENT OF PROXY**

**Name:** ……………………………………………………………………………..

**Address:** ………………………………………………………………………….

………………………………………………………………………………………

**Phone:** …………………………………

**Email:** …………………………………..

I hereby appoint ………………………………………………………………………….

 full name of proxy

being a member of HRA, as my proxy to vote for me on my behalf at the general meeting of the association (Annual General Meeting or special general meeting as the case may be) to be

held on the ………day of………………….and at any adjournment of that meeting.

 (month and year)

\* My proxy is authorised to vote **in favour** **of** / **against** *(circle as appropriate)* the resolution(s) *(write the resolution(s) below)* **or** specify permission is given to vote as the proxy is instructed on any/all decisions requiring a vote:

……………………………………………………… …………………………

Signature of member appointing proxy Date

**Note:** A proxy vote may not be given to a person who is not a member of HRA.

**Send to:** **Att: Secretary**

 **C/- HRA**

**PO Box 7363**

**Leura NSW 2780**