NOMINATION FORM

Full Name of Nominated Member:

…….

Telephone Number of Nominated Member:

……..

OGA Membership Number of Nominated Member:

…….

Position Being Nominated For:

Committee Member

Age of Nominee:

……

Full Name and OGA Number of Nominator (Proposer):

…….

***All nominations should be filled and emailed to ladiescollegeoga@gmail.com on or before the 20th of October 2026. Members are advised to read Item D of the Notice of Meeting dated 03rd October 2026 for further details on the process.**

**** Kindly note that the age groups that fall vacant for the upcoming year 2026/2027 are;**

(a) 30 to 40 years
(b) 40 to 50 years
(c) 50 to 60 years