



American Association for Nude Recreation- Southwest Region **CLUB DELEGATE CERTIFICATION**

Club Name: _____

List below the name and address of the person authorized to represent your club at AANR-SW Board of Director Meetings.

Name: _____

Street Address: _____

City, State, Zip: _____

Email: _____

Check the method of Delegate election used by your club (must be one of these):

1. Delegate was elected by the AANR basic membership of our club in a General meeting held on (date): _____
2. Delegate was elected by the AANR basic membership of our club by a mail ballot (date mailed out): _____
3. The AANR basic membership of our club voted to assign the authority to name the delegate to the party listed below in a General meeting held on (date): _____
- The Club Board of Directors
 - The Club Certifying Officer, who in exercise of this authority selected the above Delegate.

This form, completed and signed by the Certifying Officer, must be given to the AANR-SW Recording Secretary.

This Certification will remain in effect until superseded by a subsequent Club Delegate Certification submission.

CERTIFICATION

I, the undersigned, hereby certify that the above named Delegate has been duly elected as stated above in conformance to AANR-SW Bylaws and Procedures.

Signature of Club Certifying Officer

Date