



BOARD NOMINATION FORM

2026

I, _____, a member of Hemophilia Ontario in good standing, hereby
nominate _____ of _____

as a candidate for:

- A voting Director position
- A non-voting youth representative
(must be at least 18 years of age)

On the Hemophilia Ontario Board of Directors.

Date: _____

Nominator:

Name _____

Email _____

Phone _____

Nominee:

Name _____

Email _____

Phone _____