



## APPOINTMENT OF PROXY FORM

*If you are unable to attend the Annual General Meeting, you may appoint another member of STAA to vote on your behalf. Your voice is heard through your proxy, and validates decisions made at the AGM.*

*Please complete the form below and return to the Secretary no later than 24 hours before the meeting.*

I, .....  
(name)

of .....  
(address)

being a member of the Shiatsu Therapy Association of Australia Inc.

appoint .....  
(name of proxy holder)

of .....  
(address of proxy holder)

being a member of the Shiatsu Therapy Association of Australia Inc., as my proxy to vote for me on my behalf at the Annual General Meeting of the Association to be held at 4pm on Sunday 28 May 2017.

.....  
Signed

Date: