

**ANZAP Annual General Meeting**

Friday 22nd March 2024 – 5:30pm

Sofitel Sydney Darling Harbour, 12 Darling St, Sydney NSW

**FORM OF APPOINTMENT OF PROXY**

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| Name: |
| of |
| Address 1: |
| Address 2: |
| Suburb: | State: | P/C: |
| being a Member of Australian and New Zealand Academy of Periodontists Inc. (“**Academy**”) appoint (Name) |
| of |
| Address 1: |
| Address 2: |
| Suburb: | State: | P/C: |
| being a Member of the Academy with the right to vote, as my proxy to vote for me on my behalf at the General Meeting of the Academy (annual general meeting or special general meeting, as the case may be) to be held on and at any adjournment of that meeting. |
| My proxy is authorised to vote in favour of / against (delete as appropriate) the resolution (insert details): |
| Signed: |
| Date: |