



Board of Directors Nomination Information

Eligibility:

- Nominees must be the voting representative for a member of the Tofino Destination Management Association, dba Tourism Tofino.

Involvement/Attendance Obligations:

- Minimum of 9 Board meetings per year
- Board retreat or workshop
- Participation on a Board committee or Task Force as required

Nomination Process:

- Nominations are to be submitted by Tuesday, February 16, 2021 at 5:00 p.m.
- Tourism Tofino's Board Nominating Committee will review nominations and confirm nominees

Election:

- Election will be conducted electronically
- Nominee profiles and electronic ballot will be distributed to all voting representatives of member businesses via e-mail on Tuesday, February 23, 2021
- Voting will end on Tuesday, March 9, 2021 at 5:00 p.m.
- Election results will be announced at the Virtual Tourism Tofino Annual General Meeting (AGM), held via Zoom on Tuesday, March 23, 2021 from 10:00 a.m. to 12:00 p.m.

Board Positions Available:

Director Category	# Vacancies	Term Length
Fixed Roof Accommodation Providers (FRAP)	2	2 years
Non-Fixed Roof Accommodation Providers (Non-FRAP: includes attractions, activities, services)	1	2 years
Director At Large (may be either FRAP or Non-FRAP)	2	2 years

For further information contact Nancy Cameron at 250-800-7380 ext. 101 or by email: nancy@tourismtofino.com



Board of Directors Nomination Form

Nominations must be submitted on **Tuesday, February 16, 2021 by 5:00 p.m.** Forms can be scanned and e-mailed to nancy@tourismtofino.com

For Director Category: (tick one)

- Fixed Roof Accommodation Provider
- Non-Fixed Roof Accommodation Provider
- At Large

Nominee Information: *(must be the voting representative for a member business)*

NAME (please print) _____

COMPANY _____

POSITION _____

MAILING ADDRESS _____

PHONE _____ E-MAIL _____

BIOGRAPHY MUST BE INCLUDED FOR NOMINATION FORM TO BE ACCEPTED (Biography to be no more than 100 words and can be provided as an attachment).

Nominee Consent

I, _____, hereby consent to actively participate as a Director of the Tofino Destination Management Association, dba Tourism Tofino.

SIGNATURE _____ DATE _____

Nominator: *(must be an employee of a member business)*

NAME (please print) _____

COMPANY _____

SIGNATURE _____ PHONE _____