



2024 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 **5:00pm on Monday, February 19, 2024**
- Tourism Tofino's 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 Monday, March 4, 2024
- Voting will end at 5:00pm on Tuesday, March 19, 2024
- Election results will be announced at the Tourism Tofino Annual General Meeting (AGM), held on Tuesday, March 26, 2024, from 9:00am to 12:00pm at Tin Wis Resort.

Board Positions Available:

Director Category	# Vacancies
Fixed Roof Accommodation Providers (<i>FRAP</i>)	0
Non-Fixed Roof Accommodation Providers (<i>Non-FRAP includes: attraction, activity, campground, tour operator, event producer/planner, retail, food & beverage or other visitor-facing service provider</i>)	1
Director At Large (<i>may be either FRAP or Non-FRAP</i>)	2

For further information contact Brad Parsell at 250-800-7380 ext. 101 or by email: brad@tourismtofino.com



Board of Directors Nomination Form

Nominations must be submitted on by **5:00 p.m. on Monday, February 19, 2024.** Forms can be scanned and e-mailed to brad@tourismtofino.com

For Director Category: *(tick one)*

- Fixed Roof Accommodation Provider
- Non-Fixed Roof Accommodation Provider *(attraction, activity, campground, tour operator, event producer/planner, retail, food & beverage or other visitor-facing service provider)*

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 _____