



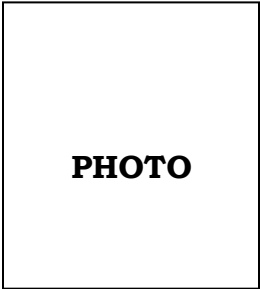
GHANA FOOTBALL ASSOCIATION
NOMINATION FORM FOR THE POSITION OF EXECUTIVE COUNCIL MEMBER
OF REGIONAL FOOTBALL ASSOCIATION (RFA) - 2020

GFA's Copy

Region:

Nomination Fee - GH¢700.00

- 1. NAME OF CANDIDATE:
- 2. a. ADDRESS:
- b. E-MAIL: SEX: M F
- 3. OCCUPATION: TEL:.....
- 4. DATE OF BIRTH:



- 5. NATIONALITY:
(Attach copy of bio-data page of your passport and or other forms of National ID)
- 6. MEMBER OF ASSOCIATION WITH WHICH THE CANDIDATE IS AFFILIATED.....

7. DO YOU HAVE ANY CRIMINAL CONVICTIONS? YES NO

8. TIN NO. SIGNATURE:..... DATE:

9. a. RFA MEMBER PROPOSING CANDIDATE:

b. NAME OF AUTHORIZED OFFICER OF THE PROPOSING RFA MEMBER:
(Per Article 13j of the GFA Statutes, 2019)

DESIGNATION: SIGNATURE:..... DATE:.....

10. a. RFA MEMBER SUPPORTING CANDIDATE (DIFFERENT FROM PROPOSING CANDIDATE)

b. NAME OF AUTHORIZED OFFICER OF THE SUPPORTING RFA MEMBER:
(Per Article 13j of the GFA Statutes, 2019)

DESIGNATION: SIGNATURE:..... DATE:.....

11. PLEASE COMPLETE AND ATTACH QUESTIONNAIRE IN ANNEX B PART 3 OF THE GFA STATUTES, 2019

FOR OFFICIAL USE ONLY

NOMINATION FEE RECEIPT NO. DATE:.....

NAME SIGN

(OFFICE STAMP)



GHANA FOOTBALL ASSOCIATION
NOMINATION FORM FOR THE POSITION OF EXECUTIVE COUNCIL MEMBER
OF REGIONAL FOOTBALL ASSOCIATION (RFA) - 2020

Candidate's Copy

Region:

Nomination Fee - GH¢700.00

1. NAME OF CANDIDATE:

2. a. ADDRESS:

b. E-MAIL: SEX: M F

3. OCCUPATION: TEL:.....

4. DATE OF BIRTH:

5. NATIONALITY:
 (Attach copy of bio-data page of your passport and or other forms of National ID)

6. MEMBER OF ASSOCIATION WITH WHICH THE CANDIDATE IS AFFILIATED.....

7. DO YOU HAVE ANY CRIMINAL CONVICTIONS? YES NO

8. TIN NO. SIGNATURE:..... DATE:

9. a. RFA MEMBER PROPOSING CANDIDATE:

b. NAME OF AUTHORIZED OFFICER OF THE PROPOSING RFA MEMBER:
 (Per Article 13j of the GFA Statutes, 2019)

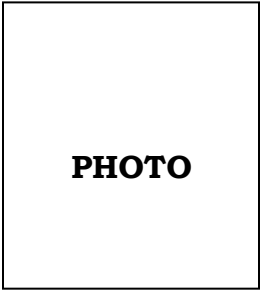
DESIGNATION: SIGNATURE:..... DATE:.....

10. a. RFA MEMBER SUPPORTING CANDIDATE (DIFFERENT FROM PROPOSING CANDIDATE)

b. NAME OF AUTHORIZED OFFICER OF THE SUPPORTING RFA MEMBER:
 (Per Article 13j of the GFA Statutes, 2019)

DESIGNATION: SIGNATURE:..... DATE:.....

11. PLEASE COMPLETE AND ATTACH QUESTIONNAIRE IN ANNEX B PART 3 OF THE GFA STATUTES, 2019



FOR OFFICIAL USE ONLY

NOMINATION FEE RECEIPT NO. DATE:.....

NAME SIGN

(OFFICE STAMP)