**Proxy Notice**

I, (please print name) ………………………………………………………………………………………………… of

(please print address) ……………………………………………………………………………….……………………

…………………………………………………………………………………………………………………………………..

being a member of BAPA and entitled to vote, hereby appoint the Chair / Vice Chair / Secretary (please delete as appropriate) / named member of BAPA (please print

name) ………………………………………………………………………………………………………………….……

as my proxy to vote on my behalf at the Annual General Meeting of the British Association of Paediatricians in Audiology, to be held at 09.00 on 31st January 2025 in Manchester.

Signature of member ………………………………………………………… Date …………………………

I give discretion to my proxy to vote as they feel appropriate / I wish my proxy to vote / abstain from voting

(any specific instructions for proxy) …………………………………………………………………….……………...

……………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………….

A proxy notice may be revoked by delivery of a Notice of Revocation of a Proxy Appointment to a Trustee / Director attending the meeting, prior to commencement of the meeting.

All Proxy Notices must be sent to the Executive Secretary by 17th January 2025.



Dr Veronica Hickson

Executive Secretary BAPA

E-mail: veronica.hickson@wales.nhs.uk

Post:

Paediatrics Ward B4W Serennu Children’s Centre

Royal Gwent Hospital Cwrt Camlas

Newport Rogerstone

NP20 2UB Newport

 NP20 9LY

Date: 9th January 2025