

Advisory Committee nomination form

You may attach one or two page resume or other relevant information if you wish.

Please return this nomination form to The Director, Bega Valley Regional Gallery, PO Box 492, Bega NSW 2550



www.begavalley.nsw.gov.au
Zingel Place, Bega | Phone (02) 6499 2187
Tues–Fri 10am to 4pm | Sat 9am to 12 noon

NAME: _____ ORGANISATION: _____

ADDRESS: _____ PHONE: _____

FAX: _____

POSTCODE: _____ EMAIL: _____

About your nomination:

Please detail any relevant work experience and/or information about your background in support of your nomination to the Gallery Advisory Committee:

What skills can you contribute to the Gallery Advisory Committee?

Please provide information on any business activities, arts practice, art collection interests, networks or community groups you are a member of.