



NATIONAL ASSOCIATION OF PARLIAMENTARIANS®

COMMISSION CONSENT TO SERVE FORM

I, _____ (*Print Name*), hereby certify that I have met the requirements as defined in NAP Bylaws Article X for the position I am seeking and I hereby consent to have my name placed in nomination for the position of **Commission on Credentialing Member** for the _____ term. I am currently (check one) a credentialed member (Registered or Professional Registered Parliamentarian) or a regular member.

If elected, it is my intent to serve in the position to which I am elected to the best of my ability.

Name: _____

Address: _____

Phone Number: _____

E-mail Address: _____

By sending this form as an e-mail attachment with your personal information included, you hereby consent to serve as if you had signed the form personally.

Candidates must be familiar with entire Campaign Policy, as published in the NAP Operational Policies & Procedures Manual, available for download via the members only section of the NAP website.

Under the NAP Campaign Policy a candidate is defined as a member who has declared his or her candidacy for an office listed in Article X.1 of the NAP Bylaws by submitting a signed NAP Consent Form to Serve to headquarters prior to publication in the *National Parliamentarian*® or to the secretary within 30 minutes of the closing of nominations.

Return form to: NAP Headquarters
213 South Main Street
Independence, MO 64050
Fax: 816.833.3893
E-mail: hq@nap2.org