



NATIONAL UNION OF RAIL, MARITIME AND TRANSPORT WORKERS

NOMINATION FOR R.M.T. NATIONAL DISABLED MEMBERS' CONFERENCE 8^{TH} NOVEMBER 2011

		Branch / Regional Council	
Surname			Forename(s)
Home Address			
Post Code			Email Address
Employer			N.I. Number
Phone No			Membership No
Access Requirem	ents		
BRANCH STAMP	Sign	ature o	of Nominee
	Sign	ature o	of Branch Secretary
	Sign	ature o	of Branch Chair
Date			
This form should (EO/27)	be returned to	Unity	House by Wednesday, 26 th October 2011.
Ethnic Group (Ple	ase specify. This i	informa	tion is used as part of our equal opportunities policy)
Tick one box to be	est describe your	ethnic	group or background
☐ W hite			Mixed/multiple ethnic groups
☐ Asian/Asia	n British		Black/African/Caribbean/Black British
☐ Other eth	nic group (nlea	sa sna	cify)