**Appendix 2 Proxy voting form**

(Clause 39 (4))

PROXY VOTING FORM

For the use of a member of the association who is unable to attend a general meeting of Theatre Network NSW Inc.

I, (name)

of (address)

Phone: (work/wobile)

being the duly notified member Theatre Network NSW Inc. hereby authorise:

Name of Proxy (name of proxy)

of (address of proxy)

Phone: (work/mobile of proxy)

to act FOR AND ON MY BEHALF at the general meeting of the above Association on the Wednesday 21 April, 2021. This authorization includes voting on Agenda Item 10: Special Resolution - Clause 32 Quorum for General Meetings

Signed:

Date:

Additional comments/instructions:

**Office Use Only**

**Authorised by:**

Print Name: Secretary / Chairperson

Signed:

Date:

*This form must be received at the Theatre Network NSW office at least 24 hours prior to the scheduled commencement of the meeting.*