

NOMINATION FORM



Please complete and return the nomination form below.

A nomination fee of \$95.00 (incl GST) per category is payable with your nomination.

Individual or Organisation nominated: _____

Title of Entry: _____

Category nominated (please ✓):

- | | |
|--|---|
| <input type="checkbox"/> Individual achievement – General | <input type="checkbox"/> Security Management |
| <input type="checkbox"/> Individual achievement - Technical | <input type="checkbox"/> In-House Security Team |
| <input type="checkbox"/> Security Student of the Year | <input type="checkbox"/> Training |
| <input type="checkbox"/> Integrated Security Solution (projects above \$250,000) | |
| <input type="checkbox"/> Integrated Security Solution (projects below \$250,000) | |
| <input type="checkbox"/> Special Security Event or Project | |

Name of person submitting nomination: _____

Position: _____

Organisation: _____

Address: _____

State: _____

Postcode: _____

Phone: _____

Email: _____

I have read the rules and conditions of entry and agree to abide by them. I accept the judge's decision as final and enclose a completed application form together with relevant appendices. I agree to my entry being publicised at any time after the receipt of my entry and I certify that the information provided is true and correct to the best of my knowledge.

I and any company or firm I represent will indemnify and keep indemnified ASIAL and jury members of the competition against any costs of any nature or damages which may be incurred by or awarded against them or any of them as a result of any legal proceedings which may take place as a result of the entry in the competition.

Name: _____

Signature: _____

Date _____

Entries must be received by **5.00pm Friday 2nd March 2012**.

Completed nominations and payment must be forwarded to:
Judging Panel, 2012 Australian Security Industry Awards for Excellence
Security Industry House
PO Box 1338 CROWS NEST NSW 1585

PAYMENT DETAILS

A cheque for \$95 per category entry made payable to ASIAL, is enclosed, OR

I wish to pay via Credit card: Mastercard Visa Amex

Card Holder Name: _____

Card Number: _____

Expiry date: _____

Total payment: \$ _____

Signature: _____