



**Nomination Form for the New Zealand Branch Committee of the  
Australasian Association of Clinical Biochemistry and Laboratory  
Medicine  
2026 - 2027**

I ..... and  
(Please Print Title, Initials and Surname)

I ..... ,  
(Please Print Title, Initials and Surname)

members of the Australasian Association of Clinical Biochemistry  
and Laboratory Medicine, hereby nominate

..... as

..... of the New Zealand Branch of  
(Print Office)  
the Association, for the year 2026–2027.

Signature of first nominator .....

Signature of second nominator .....

**Acceptance Form**

I .....  
(Please Print Title, Initials and Surname)

accept the nomination for the position of : .....  
on the NZ Branch Committee of AACB for the year 2026–2027.

Signature of Nominee .....

Email address.....

Nominations must be made in writing by two members (excluding Corporate and Affiliate members) of AACB and should be accompanied by the nominee's written acceptance.  
Please send completed forms to:

**Christian Christian**  
**Secretary, NZ Branch of AACB**  
**Email: christian.christian@awanuilabs.co.nz**