

**Proxy Voting Form**

**4th Annual General Meeting**

**Thursday 7 August 2025- 7.30pm**

**Via Zoom**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(full name) , being a member of the New Zealand Oral Health Association and entitled to vote at annual general meetings, nominate the President or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(full name) , (a member of the New Zealand Oral Health Association) to vote on my behalf on all motions, proposals and amendments at the annual general meeting to be held Thursday 7 August 2025 at 7.30pm.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NB: If, after returning a proxy form, you wish to revoke your proxy, you may do so in writing.

Please download, sign, scan and return the completed form via email to [contact@nzoha.org.nz](mailto:contact@nzoha.org.nz) by 5.00pm Tuesday 5 August 2025.