

ANNUAL GENERAL MEETING PROXY FORM

I / we,	(name) of
	(address) being a member of the Institute for Respiratory nable to attend the annual general meeting and wish to appoint (select one):
	OR The Chairperson
To vote on m	ny behalf at the Institute for Respiratory Health's Annual General Meeting on Thursday
Signed:	
Date:	

Please complete and return this proxy form to the Institute on or before 5pm Thursday 6th May 2021 to <u>alison.harvie@resphealth.uwa.edu.au</u> or the Institute for Respiratory Health, QEII Medical Centre, Level 2, 6 Verdun Street, Nedlands WA 6009.

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