



HOPE General Assembly, Tallinn 2020 PROXY VOTING FORM

I,

(FULL NAME IN CAPITAL LETTERS)

from

(COUNTRY)

being a member of HOPE, hereby appoint

(NAME OF PERSON YOU WISH TO GIVE YOUR RIGHT TO VOTE TO,
FULL NAME IN CAPITAL LETTERS AND COUNTRY)

or if the above person is unavailable, I appoint as my second choice

(SECOND CHOICE SHOULD FIRST NAMED PERSON BE UNABLE TO VOTE,
FULL NAME IN CAPITAL LETTERS AND COUNTRY)

as my proxy to vote in my name and on my behalf at the General Assembly
of HOPE, to be held in Tallinn, on Friday, 15th May 2020
at 12.00 -13.30 pm. and at any adjournment thereof.

(SIGNATURE)

____/____/____

(DATE)

This document can be downloaded on the website: www.hospitalteachers.eu

If you are unable to attend the General Assembly, please forward the
completed form to a member of HOPE who will attend the General Assembly.