

Piney Woods Regional Advisory Council
Trauma Service Area G

Voting Proxy Form

Current RAC-G Voting Members may vote by giving written proxy to any member within their County/Entity/Provider to vote during a RAC-G General Assembly Meeting.

The proxy should be issued by lateral position, e.g. Physician to Physician, Hospital Representative to Hospital Representative and EMS Representative to EMS Representative.

(Please print name of Proxy Holder)

from _____ to vote in my place as my proxy on all matters which are subject to voting by proxy that may come before the membership at the General Assembly Meeting held _____ (date of meeting).

(Voting Member) Your Name _____
Hospital/EMS Provider/Physician

Date

Please fax this form to RAC office a day before the date of General Assembly Meeting. Fax # 903-593-5092 or send as an attachment to email to Sheryl@rac-g.org one day prior to meeting. If emergency is cause for non-attendance, a signed proxy form may be presented at the Registration Desk on the day of the meeting.