

## Consent to act as an AIDA Board Director

I, \_\_\_\_\_ [Full Name]

of, \_\_\_\_\_

[residential address, a postal address is not sufficient] consent to act as an AIDA Board Director for the **Australian Indigenous Doctors' Association Limited, ABN 84 131 668 963** ("Company") in accordance with section 201D of the Corporations Act 2001.

In accordance with section 205B and 205C of the Corporations Act 2001, I give notice of the following personal details:

### Name

Title	First Name	Surname
-------	------------	---------

Former Names (if any) include maiden names, if applicable

DOB	Place of Birth
-----	----------------

### Usual Residential Address

Suburb	State	Postcode
--------	-------	----------

Director Number

Signature	Date
-----------	------