

**AFFIRMATION FORM**

Procedures Manual for ICMCI Volunteer Nominations

APPENDIX 2 of Procedures Manual for ICMCI Volunteer Nominations

**AFFIRMATION OF ROLE, RESPONSIBILITIES, RIGHTS & OBLIGATIONS**

**IMC USA Member Serving on ICMCI Committees/Taskforces**

I, the undersigned individual \_\_\_\_\_ serving or being nominated to serve as a member on the ICMCI Committee/Taskforce \_\_\_\_\_, pledge to fulfill my role and responsibilities as defined in the VOLUNTEER GUIDEBOOK FOR SERVING ICMCI VOLUNTEERS.

**Affirmed by Volunteer:**

**Accepted by IMC USA Lead Delegate:**

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*

**Notes:**

1. *Applicants shall complete this form prior to making any commitments to ICMCI.*
2. *Volunteers serving on an ICMCI Committee/Taskforce shall complete this form on an annual basis*

Affirmation Form for IMC USA Members serving on ICMCI Committees	<b>Issue Date / Version:</b> 2018-03-22
<b>Compiled / Reviewed By:</b> Lead Delegate / Governance Committee	<b>Effective Date:</b>