

Calgary District Beekeeping Association **PROXY FORM**

I hereby authorize ________ to serve as my proxy for voting purposes as relates to items requiring a Board Member vote for the Calgary District Beekeeping Association (CDBA).

I hereby grant permission to the above the vote on my behalf at the meeting held on March 26, 2025.

Name of Board Member requiring Proxy: ______

Signature: _____

Date: _____