



*Serving Georgia's Elderly Since 1953*

## **Designated Representative Voting Form**

The administrator or governing body of each Regular Member shall specify in writing a Designated Representative affiliated with that Regular Member facility to sit as a member of the House of Delegates. The facility may change such representative at any time by written communication to the President at least forty-eight (48) hours prior to a convening of the House of Delegates.

**Deadline to Submit Designated Representative Form to GHCA - Monday, June 12, 2017 at 8:30 a.m.**

Credentials of the Designated Representative or Alternate Representative must be properly certified by the Credentials Committee prior to any convening of the House of Delegates. The Credentials Committee shall establish and publish the deadline for presentation of credentials for certification.

The individuals shown below will be considered Designated Representative and Alternate Designated Representative to the facility below unless changed in accordance with the Bylaws:

**Facility:** \_\_\_\_\_

**Designated Representative:** \_\_\_\_\_

**Alternate Representative:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please return to:

**Georgia Health Care Association  
160 Country Club Drive  
Stockbridge, Georgia 30281  
Fax 678-289-6400  
info@ghca.info**