



ANNUAL MEETING OF MEMBERS PROXY FORM

I, _____, a **voting member** in good standing of the Alberta College of Family Physicians (ACFP), hereby give _____, a voting member in good standing, the authority to vote on my behalf at the Annual Meeting of Members to be held **Saturday, March 7, 2026, at 3:45 – 5:00 p.m.** in person and virtually.



Name: _____ Date: _____

Signature: _____

Please ensure delivery of the completed proxy to the ACFP no later than **Friday, February 27, 2026, at 4:00 pm** by email: governance@acfp.ca

