**PROXY FORM FOR ANNUAL GENERAL MEETING**

I,……………………………………………being a member of Floatation Therapy Association Australia & New Zealand Incorporated hereby appoint ……………………………….. as my proxy, to vote on my behalf at the Annual General Meeting. This proxy is executed this ……… day of ……………………, 2024.

………………………………………………………. (Member)

……………………………………………. Business Name