



ONTARIO BASKETBALL ASSOCIATION PROXY FORM – ANNUAL MEETING OF MEMBERS

Saturday, February 21, 2026

Dear Active Member/ Affiliate Member/Honourary Member (“Voting Member”):

This document is the Ontario Basketball Association’s (the “OBA”) Proxy form provided for the use of Voting Members at the Annual Meeting of the Members (“AMM”). The AMM is scheduled to take place on Saturday, February 21, 2026.

This document contains your Proxy form for the purposes of:

- Electing directors for the OBA Board of Directors;
- Appointing auditors for the OBA; and
- Voting on OBA business and motions that may properly come before the AMM.

Voter Eligibility:

Eligible voters for this ballot will include anyone who is 18+ and paid dues as an active Member of the OBA between September 1, 2024 and October 15, 2025.

The OBA is hosting the 2025 AMM virtually. The OBA is providing the opportunity for Members to submit a Proxy, in accordance with the OBA’s bylaws.

Proxy forms must be submitted by email to info@basketball.on.ca at least 48 hours in advance of the AMM, as required under Section 4.7.1 of the OBA bylaws. The form must fully complete. Please sign and date the Proxy form.

A submitted Proxy form revokes all proxy forms that you have previously signed that relate to the AMM. Please note that if you submit a valid Proxy form and also register for and attend the AMM, your Proxy will be used by the scrutineer.

If you have any questions about completing this form, please contact:

Name	Position	Email Address
Claude Nembhard	Chief Executive Officer	cnembhard@basketball.on.ca

Appointing a Proxyholder:

You have the right to appoint someone as your Proxyholder. To do this, simply print the name of the person you are appointing in the space below. As per Section 4.7.1 of the OBA bylaws, this person does not have to be a Member of the OBA.

Name of Proxyholder	Phone Number
_____	(____)_____
Email Address	

You must sign this Proxy form. When you sign this Proxy form, you authorize the Proxyholder to vote on your behalf at the 2025 OBA AMM. By signing this form, you consent to the use of the personal information on this form by the OBA for the purposes of the corporate governance of the OBA.

Member Name

Member Club Affiliation

Member Address

Signature

Member City and Postal Code

Date (YYYY-MM-DD)
