

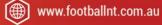
Form 2

STANDING COMMITTEE APPLICATION			
Zone (tick)			
Southern			
Central			
Northern			
Standing Committee(tick)			
Coaches			
☐ Women's			
☐ Juniors'			
APPLICANT FOR STANDING COMMITTEE DETAILS			
Name: Residential Address in Zone Email address: Signature:			 •••••
Nominees can only nominate one candidate for a standi a Club or two Registered Participants in the zone. A Regi or guardian of a Registered Participant under 18 years of	stered Partic		
Applicant must be 18 years of age. There is a minimum of maximum of 3 members per zone. Appointments to coac Accredited coaches.		•	ust be
CLUB NOMINATION			
Registered Club:			

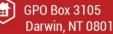




























Name of Authorised Club Officer ..... Signature of authorised .......Date:



## **REGISTERED PARTICIPANTS PROPOSER**

Name of Registered Participant 1 Signature of RP 1		Date:	/	/					
Name of Registered Participant 2 Signature of RP 2		Date:	/	/					
ELECTORAL RETURNING OFFICER ELECTION CONFIRMATION									
The Electoral Returning Officer (ERO) confirms Applicant elected to the abovementioned Standing Committee.									
<u> </u>		•••••		/	/				
Signature of ERO N	lame of ERO								
Date of Election: / /									





















