**Randwick Netball Association**

**Executive Committee Nomination Form**

**NO HANDWRITTEN FORMS WILL BE ACCEPTED**

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee’s Name** | Click or tap here to enter text. | **Date** | Click |

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| --- | --- | --- | --- |
| **Phone/Mobile** | Click | **Email** | Click or tap here to enter text. |

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| --- | --- |
| **Club** | Click or tap here to enter text. |

***Please click on the position nominating for below***

***Executive Committee Positions***

**President  Senior Vice President  Junior Vice President**

**Secretary  Assistant Secretary  Treasurer**

**Assistant Treasurer  Umpires Co-ordinator  Coaching Co-ordinator**

**Senior Convenor  Junior Convenor  Minutes Secretary  Senior Competition Co-ordinator  Junior Competition Co-ordinator**

**Netball Nsw Delegate**

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominated by** | Click or tap here to enter text. | **Phone/Mobile** | Click |

|  |  |
| --- | --- |
| **Club/Life Member** | Click or tap here to enter text. |

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| **Seconded by** | Click or tap here to enter text. | **Phone/Mobile** | Click |

|  |  |
| --- | --- |
| **Club/Life Member** | Click or tap here to enter text. |

***Please note: This form is to be filled out electronically and saved as a Word Document and returned to the email address at the bottom. The signature will be accepted as an electronic signature in accordance with legal principles***

***(typing your name in the spaces provided below is sufficient)***

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominator’s Signature** | Click or tap here to enter text. | **Date** | Click |

***(typing your name in the spaces provided below is sufficient)***

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| --- | --- | --- | --- |
| **Seconder’s Signature** | Click or tap here to enter text. | **Date** | Click |

***(typing your name in the spaces provided below is sufficient)***

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominees Signature** | Click or tap here to enter text. | **Date** | Click |

***Please continue to next page***

***Club Secretary Contact Details***

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | Click or tap here to enter text. | **Phone/Mobile** | Click |

***Please enter Qualifications & Experience below***

|  |
| --- |
| Click or tap here to enter text. |

***All details entered above will be verified, including the consent of the Nominee by the returning officer and/or the Association Secretary before being placed on any ballot papers.***

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| --- | --- | --- | --- | --- |
| **Office Use Only** | **Date Received** | **My Netball ID #** | **Details Checked** |  |
|  |  |  |  |  |

**Please save document and send as an attachment to the Returning Officer, Judy Floyd at** judyfloyd1956@hotmail.com before COB 5.30pm Thursday, 10 October 2019