



SYDNEY NORTH WEST ZONE 10 BOWLING ASSOCIATION INC.

ABN 14 767 183 850

P.O. Box 506 Drummoyne NSW 1470

Email: secretary@zone10.org.au

NOMINATION FOR ZONE 10 COACH'S COMMITTEE (5)

COACH'S COMMITTEE (clause 20.1)

Nominee must hold a current accredited Coaching Certificate. Nomination must include a resume of experience. Nominations close with the Zone Secretary at 5 pm on Monday 28th June 2010

We hereby nominate

NAME:

for the position

Indicate position:	COACH'S COMMITTEE
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PROPOSED BY

Print Name:

Who is a full member of

<i>Bowling Club</i>

Signed by the Proposer

Signature:

SECONDED BY

Print Name:

Who is a full member of

<i>Bowling Club</i>

Signed by the Seconder

Signature:

CONSENT OF NOMINEE

I consent to this nomination

Signature:

I am a full member of

<i>Bowling Club</i>

Additional Details

Address	Postcode:	Phone:
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