

**MANLY WARRINGAH NETBALL ASSOCIATION INC  
NOMINATION FORM**



NAME		CURRENT MEMBER PLAYHQ	Yes / No
AFFILIATED CLUB:		EMAIL:	
MOBILE NO:		Current WWC No/Exp:	

EXECUTIVE POSITION	SELECT	EXECUTIVE POSITION	SELECT
President	<input type="checkbox"/>	Competition Secretary	<input type="checkbox"/>
Vice President	<input type="checkbox"/>	Umpires Convenor	<input type="checkbox"/>
Secretary	<input type="checkbox"/>	Representative Team Convenor	<input type="checkbox"/>
Treasurer	<input type="checkbox"/>	Growth & Development Officer	<input type="checkbox"/>
Coaches Convenor	<input type="checkbox"/>		

SUB- COMMITTEE	SELECT	SUB-COMMITTEE	SELECT
Sponsorship, Communications and Promotions	<input type="checkbox"/>	Coaches Development Committee	<input type="checkbox"/>
Representative Committee	<input type="checkbox"/>	Umpires Committee	<input type="checkbox"/>
Selection Committee (Junior)	<input type="checkbox"/>	Selection Committee (Senior)	<input type="checkbox"/>
Competition Committee	<input type="checkbox"/>	Grading Committee	<input type="checkbox"/>
Rep Coaches/Managers Appointments	<input type="checkbox"/>	Disciplinary Committee	<input type="checkbox"/>
Representative Umpires Appointments	<input type="checkbox"/>	NetSetGo Committee	<input type="checkbox"/>
Governance Committee	<input type="checkbox"/>	Trophy Committee	<input type="checkbox"/>
Finance Committee	<input type="checkbox"/>		<input type="checkbox"/>

OTHER ROLES	SELECT	OTHER ROLES	SELECT
REP LIAISON OFFICER (JUNIOR)		REP LIAISON OFFICER (SENIOR)	

<b>NOMINATED BY:</b>		<b>DATE:</b>	
CLUB		SIGNATURE:	
<b>SECONDED BY:</b>		<b>DATE:</b>	
CLUB:		SIGNATURE:	

I hereby accept this nomination and have read the role description on the MWNA Executive and Sub Committee Policy. I also have the current qualifications outlined

<b>Nominee:</b>		<b>Signature:</b>	
<b>Date:</b>			

*All nominations are to be submitted with a **detailed resume of your Qualifications and experience** relevant to the position/s nominated for and limited to half page only. Define your experience at Netball Australia, Netball NSW, MWNA and Club level along with any other general qualifications and experience you have.*

**Forward form to [mwnanominations@gmail.com](mailto:mwnanominations@gmail.com) C/- Secretary, MWNA. by 5.00 pm on the date stipulated.**

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NOMINEE:		AFFILIATED CLUB:	
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**CLUB QUALIFICATIONS/EXPERIENCE:** (Please detail) Attach any relevant documentation to support your application

**MWNA QUALIFICATIONS/EXPERIENCE:** (Please detail)

**NSW AND AUSTRALIA QUALICATIONS/EXPERIENCE:** (Please detail)

**YOUR QUALIFICATIONS/EXPERIENCE:** (Please detail your qualifications including expiry date along with any other professional experience you may have that will assist you in your role with MWNA).