# South Coast District Women’s Bowling Association Nomination Form 2019-20

**POSITION PRESIDENT / VICE PRESIDENT / SECRETARY / TREASURER /**

(circle 1) **MATCH COMMITTEE / SELECTION COMMITTEE**

|  |  |  |
| --- | --- | --- |
| **Nominee** | **……………………………….**  (Block Letters) | **……………………………..**  (Signature) |
| **Proposer** | **…………………………………**  ( Print Name) | **……………………………….**  (Signature) |
| **Seconder** | **………………....................**  (Print Name) | **………………………………..**  (Signature) |

**Signature**

**Of Nominee ……………………………….... Date**………………………..

# List Nominee’s Relevant Experience

Use space below

…………………………………………………………………………………………………………………………………………………………….

.

…………………………………………………………………………………………………………………………………………………………….

…………………………………………………………………………………………………………………………………………………………….

…………………………………………………………………………………………………………………………………………………………….

…………………………………………………………………………………………………………………………………………………………….

……………………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………………………………

**Please Note: Nominations close Thursday 27th June 2019**