**TAREN POINT TITANS J.R.L.F.C.**

**COACH NOMINATION FORM** **(year)**

*Note: This is a fillable form. Type in your information, tab between fields, save the file, and email.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | | |
| **Address:** |  | | |
| **Suburb:** |  | **Postcode:** |  |
| **Phone:** |  | | |
| **Email** |  | | |

|  |  |
| --- | --- |
| **Team Preference: Year, Grade/Div** |  |
|  |

|  |  |
| --- | --- |
| **Working with Children Check No:** |  |

**Coach Accreditation** [please tick]

Club coach  International  MOD  MINI  L1 Trainer  L2 Trainer

|  |  |  |  |
| --- | --- | --- | --- |
| **Accreditation #:** |  | **Year Last Renewed:** |  |

|  |  |
| --- | --- |
| **Name of preferred trainer(s) & Manager:** |  |
| **Previous coaching experience:** |  |
| **Other relevant experience:** |  |

I agree that if my nomination is successful that I will abide by NRL, NSWRL and Titans code of conduct.

And that I will abide by the rules and by laws of the Cronulla Sutherland District Junior Rugby League.

I also agree that if my nomination is successful that I will make myself available to act as ground

manager for at least one game when my team plays at Gwawley Oval. And that failure to turn up for my

rostered ground managers duty or provide a substitute if unavailable and not abide by the rules of the

governing bodies listed above could result in suspension or termination of my position as Coach.

Signed by:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature | Print Name | Date |

Forms **must include** Working with number. <http://www.kidsguardian.nsw.gov.au/Working-with-children/working-with-children-check>

Please send your application to [secretary@tarenpointtitans.com](mailto:secretary@tarenpointtitans.com)