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

**NOMINATION FOR GENERAL & EXECUTIVE COMMITTEE**

Please note that all Nomination forms (see below) must have the Nominee's WCC (Working with Children) Check ID Number. Nominations will not be accepted without this.

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

To the Secretary, Taren Point Titans JRLFC:

|  |  |
| --- | --- |
| **Year Nominating For:** |       |
| **I hereby propose:** |       |
| **For the position of:** |       |

With Taren Point Titans JRLFC Inc

**Proposer:**

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

**Seconder:**

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

I hereby accept the Nomination:

|  |  |
| --- | --- |
| **Name:** |       |
| **Address:** |       |
|  |       |
| **Phone:** |       |
| **Email:** |       |
| **WWC ID #:** |       |
| **Signature:** |       |

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

Please send your nomination to secretary@tarenpointtitans.com