

Nomination Form



Venue / Regional Centre Service Award

(please circle appropriate category)

DETAILS OF NOMINEE

Name	<input type="text"/>		
Address	<input type="text" value="Street Address/PO Box"/>	<input type="text" value="Suburb/Town"/>	<input type="text" value="Postcode"/>
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth	<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YYYY"/>
1st Registered	<input type="text" value="Year"/>	Club	<input type="text"/>
Please list other Memberships:	Club	<input type="text"/>	
	Club	<input type="text"/>	

VENUE / REGIONAL CENTRE SERVICE HISTORY

Positions held / service provided	Years
1. <input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>
4. <input type="text"/>	<input type="text"/>
5. <input type="text"/>	<input type="text"/>
6. <input type="text"/>	<input type="text"/>

Other outstanding service to Athletics Victoria

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Nomination Form

Venue / Regional Centre Service Award



DETAILS OF PROPOSER

Name	<input type="text"/>		
Address	<input type="text" value="Street Address/PO Box"/>	<input type="text" value="Suburb/Town"/>	<input type="text" value="Postcode"/>
Club	<input type="text"/>		
Position	<input type="text"/>		
Signature	<input type="text"/>	<input type="text" value="DD / MM / YYYY"/>	

LIST OF ATTACHMENTS

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Closing date of application is Monday 23rd June 2014 5:00pm

Send application to: Athletics Victoria
31 Aughtie Drive
Albert Park VIC 3206