



WERRIBEE SOFTBALL ASSOCIATION INC. GENERAL NOMINATION FORM

I _____
(Name of Nominee)

Of _____
(Name of Club)

Being a financial member of the Werribee Softball Association nominate for the following position

SELECTOR

GROUNDS MANAGER

CANTEEN COORDINATOR

BAR COORDINATOR

COACH _____
PLEASE DETAIL TEAM NAME

SCORER _____
PLEASE DETAIL TEAM NAME

ASSISTANT COACH _____
PLEASE DETAIL TEAM NAME

MANAGER _____
PLEASE DETAIL TEAM NAME

CARNIVAL COORDINATOR

CARNIVAL COMMITTEE

Signature of nominee _____

Notes

This form should be lodged no later than 14 days prior to the advertised date of the association Annual General Meeting and addressed to the Association Secretary.

- via a scanned copy to email address Werribee.softball@gmail.com
- or sent via post to PO BOX 234 Werribee Victoria 3030

All of these positions will be appointed by the Executive Committee.