



NOMINATION FORM

Nominations are now being called for all positions for Caboolture Sports Softball Association during the 2015/2016 Winter Season.

- EXECUTIVE COMMITTEE**
- PRESIDENT
 - VICE PRESIDENT
 - SECRETARY
 - TREASURER
 - REGISTRAR

- OFFICE BEARERS**
- REGISTRAR - CSC Inc M'ship
 - PUBLICITY OFFICER
 - UMPIRING CO.ORDINATOR
 - REP. CO.ORDINATOR
 - GAMES CO.ORDINATOR
 - COACHING CO.ORDINATOR
 - SCORING CO.ORDINATOR
 - SERVICE AWARDS CO.ORDINATOR
 - BLUE CARD CO.ORDINATOR

I,being a member of the Caboolture Sports
 (PROPOSER)
 Softball Association, hereby nominate for the position
 (NOMINEE)
 of....., whose details are as
 (POSITION)
 follows:-

ADDRESS:POST CODE.....

CONTACT: (H) (w)

(mobile) (email)

I,HEREBY ACCEPT THE NOMINATION
 (NAME OF NOMINEE)

SIGNATURE OF NOMINEE:**DATE**.....

We, the Proposer and Seconder, whose signatures appear below, hereby nominate the abovementioned member

.....
 (PROPOSER NAME)

.....
 (SECONDER NAME)

.....
 (PROPOSER SIGNATURE)

.....
 (SECONDER SIGNATURE)

THIS FORM IS TO BE RETURNED TO: THE ADMINISTRATOR
 CABOOLTURE SPORTS SOFTBALL ASSOC
 PO BOX 1766, CABOOLTURE Q 4510
 Or email: admin@caboolturesoftball.com.au