**Nomination for Equestrian Australia Show Horse Committee Riders’ Representative**

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| Committee Information: |
| **Committee Name:** Equestrian Australia Show Horse Committee |
| **Application Closing Date:** Tuesday 15th August 2017 |

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| Personal Details: | | | | |
| Name: | | | EA Member No: | |
| Street Address: | | | | |
| Suburb: | | State: | | Postcode: |
| Email: | | | | |
| Mobile: | Telephone: | | | |

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| Business Skills and Experience:  (Include Training and Education) |
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| “Sport Governance” Skills and Experience:  (memberships, Committee Experience) |
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| Sport Knowledge and Involvement  (Achievements & Participation as a: Rider, Official. Event Organiser etc) |
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| Other Relevant Information |
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| Time Willing To Dedicate to Committee Duties  (Review of Documentation, Assistance to National Office, Projects etc) |
| Number Of Hours: |

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| Declaration: |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_have read the EA Committee Bylaws and Position Description for the National Committee and understand the commitment in time and contribution I am expected to make. I confirm that I meet the requirements to be a Committee Member of EA, in terms of skills and the need to work for the good of Equestrian Australia and the sport itself.  **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| Return: |
| **Equestrian Australia**  **ABN: 19077455755**  **PO Box 673 Sydney Markets**  **NSW 2129**  Website: <http://www.equestrian.org.au/>  Email: [kirsty.pasto@equestrian.org.au](mailto:kirsty.pasto@equestrian.org.au)    Please return this form to:  Equestrian Australia  Committee Liaison Manager  Kirsty Pasto  [Kirsty.pasto@equestrian.org.au](mailto:Kirsty.pasto@equestrian.org.au) |