



## **Nomination for National Vaulting Selector**

\* Please note: candidates may nominate themselves

Panel: Vaulting Application Closing Date: Friday 22<sup>nd</sup> February

PERSONAL DETAILS:			
Name:		EA Member No:	
Street Address:			
Suburb:	State:	Postcode:	
Email:			
Mobile:	Telephone:		

Declara	TION:
I,nominate appointment to the National Vaulting Selection Panel.	e for
SIGNED:	DATE:

CONSENT OF NOMINEE IF NOMINATED BY A THIRD PARTY:
I,agree to be nominated for the position of National Vaulting Selector.
I have read the respective National Selector position description and understand the commitment in time and contribution I will be expected to make if successful. I also confirm that I meet the requirements to be a National Selector and will at all times abide by all rules and policies held by Equestrian Australia.
Signed:Date:

Please email this form <u>and the nominee's completed resume</u> to the Equestrian Australia office to Kirsty Pasto, High Performance Sports and Media Consultant, <u>kirsty.pasto@equestrian.org.au</u> by the nominated closing date, Friday 22<sup>nd</sup> February at 5:00pm.