



MARLINS STATE LEAGUE TEAM ASSISTANT COACH NOMINATION

PLEASE RETURN FORMS TO CAIRNS NETBALL ASSOCIATION BY

5PM FRIDAY 10th NOVEMBER 2017. FORMS CAN BE EMAILED OR MAILED TO:

Email netsetgo@cairnsnetball.net.au or post to PO BOX 430N, North Cairns, and QLD 4870

NAME: _____ DOB: _____

ADDRESS: _____

CONTACT NUMBER:

(M) _____ (H) _____

(W) _____ EMAIL: _____

PREREQUISITE FOR POSITION

ASSISTANT COACH:

- Current Netball Queensland Registration
- Minimum Development and working towards Intermediate
- A current Child Positive Notice Blue Card CARD NO: _____ EXPIRY: _____

LIST COACHING CREDIATION AND EXPERIENCE

MUST BE ABLE TO ATTEND FIRST STATE LEAGUE TRIALS ON 19th NOVEMBER 2017 9:00 – 11:00am

I understand if I am successful, I must adhere to the Netball Queensland Code of Conduct, Cairns Netball Code of Conduct and Constitution and By Laws.

Applicants please sign and return to netsetgo@cairnsnetball.net.au

FULL NAME: _____

SIGNATURE: _____ DATE: _____

