



CAIRNS NETBALL

REPRESENTATIVE TEAM MANAGER 2018 "EXPRESSION OF INTEREST"

NAME: _____

ADDRESS: _____

_____ POSTCODE: _____

CONTACT NUMBER: (H) _____ (W) _____ (M) _____

EMAIL: _____

PLEASE TICK NOMINATING DIVISION:

12 yrs and Under 14 yrs and under 16 yrs and under 18yrs and under

Shirt Size: _____

PREVIOUS MANAGER EXPERIENCE:

PREREQUISITE FOR POSITION: MANGER.

- Current Netball Queensland Registration
- Current Blue Card : # _____
- First Aid Qualified
- Must be 18 Years or older.

I understand if I am successful, I must adhere to the CNA Managers Contract, Constitution and By Laws.

SIGNATURE: _____

DATE: _____

Applicants please sign and return to Rebecca at
netsetgo@cairnsmnetball.net.au
Or P.O. Box 430N, North Cairns, QLD 4870

Dates to be available :

- MUST BE ABLE TO ATTEND
1st REPRESENTATIVE TRIAL
5:00-8:00pm ON
THURSDAY 9th NOVEMBER
2017
- SQUAD REP CAMP 18th-
19th NOVEMBER 9am-4pm.
- ALL WEEKLY OR
FORTNIGHTLY TRAINING
ONCE SELECTED

CLOSING DATE: WEDNESDAY 3RD NOVEMBER 2017

