

NOMINATIONS FOR CENTRAL SQUASH COMMITTEE FOR 2017/18

<i>Office</i>	<i>Nominee</i>	<i>Nominee Signature</i>
<i>President</i>	_____	_____
<i>Treasurer</i>	_____	_____
<i>High Performance Convener</i>	_____	_____
<i>Marketing Convener</i>	_____	_____
<i>Development & Participation</i>	_____	_____
<i>Junior Development Convener</i>	_____	_____
<i>Masters Convener</i>	_____	_____
<i>Player's Representative</i>	_____	_____
<i>Committee Member</i>	_____	_____
<i>Committee Member</i>	_____	_____
<i>Committee Member</i>	_____	_____

EXPRESSION OF INTEREST FOR DISTRICT AGM

District Coach _____

District Captain _____

iSquash Administrator _____

Submitted by _____ *Squash Club*

Club President/Secretary _____ *Signature*

*This nomination form must reach Squash Central Office
NO LATER THAN THURSDAY 9TH NOVEMBER 2017 AT 5PM.*



Squash Central
PO Box 170
Marton 4741
Rangitikei
New Zealand

admin@squashcentral.co.nz

www.squashcentral.co.nz

