Nomination for Equestrian WA Interschool Nationals Team Manager

TEAM MANAGER POSITION

Number of Hours





APPLICANTS NAME						
APPLICATION CLOSING DATE						
PERSONAL DETAILS						
NAME	•					
EA MEMBER NO						
STREET ADDRESS						
SUBURB			STATE		POSTCODE	
EMAIL			JIAIL		FOSICODE	
MOBILE						
MODILE						
BUSINESS SKILLS AN	ND EXPER	IENCE (Includ	le Training and E	ducation)		
"SPORT GOVERNAN	ICE" SKILI	LS AND EXPER	RIENCE (Memb	erships, Committ	ee Experience)	
SPORT KNOWLEDG	E AND IN	VOLVEMENT (Achievements, F	articipation as a:	Rider, Official. E	vent Organiser etc
		<u> </u>	<u>′</u>	'	,	J
OTHER RELEVANT INFORMATION						
OTTER RELEVANT	NI ONIVIA	TION				
TIME WILLING AS T	FAM MAI	NAGER	DET	URN		

Applications close Monday 17th June 2024 with all forms must be signed and dated and returned via email to: interschools@equestrianwa.org.au