|  |  |
| --- | --- |
| **Nominee’s full name:** |  |
| **Nominee’s postal address:** |  |
| **Nominee’s email address:** |  |
| **Nominee’s phone number:** |  |
| **I have attached a short biography (no more than 1,000 words)** | **YES/NO (delete one)** |
| **I agree to comply with the Football NSW Rules and Regulations (including the By-Laws) and I undertake to be bound by the Code of Conduct:[[1]](#footnote-1) (YES/NO)** | **YES/NO (delete one)** |
| **Nominee’s signature:[[2]](#footnote-2)** |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **Eligible Nominator 1:** | [**INSERT NAME OF 1ST FUTSAL CENTRE/CLUB**] |
| **Name of Authorised Representative of Eligible Nominator:** |  |
| **Authorised Representative’s email address:** |  |
| **Signature of Authorised Representative:** |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **Eligible Nominator 2:** | [**INSERT NAME OF 2ND FUTSAL CENTRE/CLUB**] |
| **Name of Authorised Representative of Eligible Nominator:** |  |
| **Authorised Representative’s email address:** |  |
| **Signature of Authorised Representative:** |  |
| **Date:** |  |

1. Before signing this form, please carefully read the Football NSW Rules and Regulations (including the By-Laws) and the Code of Conduct, which can be found on the Football NSW website under the section “Standing Committees”. [↑](#footnote-ref-1)
2. Please note that you can only serve on one Standing Committee at a time. In addition, your nomination as a member of the Futsal Standing Committee is conditional upon the following:

	* + two separate affiliated Futsal Clubs or Futsal Centres (Eligible Nominators) nominating you and both of their Authorised Representatives signing this form;
		+ you signing this form; and
		+ you lodging this form and your biography via email to standingcommittees@footballnsw.com.au by **5.00pm on Thursday, 18 November 2021.** [↑](#footnote-ref-2)