

**COUNTRY FOOTBALL WA
BOARD OF DIRECTORS NOMINATION FORM**

Please complete the below and email return, along with a headshot photo, to
countryfootballwa@wafootball.com.au

NOMINATING LEAGUE TO COMPLETE

I _____ Being
(Full Name)

_____ of the _____
(Position Held) (Name of Affiliated League/Association)

_____ hereby nominate

_____ for election to the Board of
Directors of Country Football WA.

_____ (Signature) _____ (Date)

NOMINEE TO COMPLETE

I _____ the person
being nominated above, hereby consent to such nomination.

_____ (Signature) _____ (Date)

SUPPORTING INFORMATION

Please provide details on the following:

Business experience:

Directorships:

Leadership:

Football experience:

(Please provide a brief summary)

Brief bio:

(To be shared with CFWA members,
100 words max.)
