**NOMINATION FORM**

**For the position of Wellington GymSport Code Team Manager**

All nominations for positions of Wellington GymSport Team Managers must be scanned and emailed to megan.preston@gymsportsnz.com by **Friday the 17th of March.**

Only representatives from **Member Clubs** are entitled apply for this position.

By signing this nomination form you are confirming;

* Read and understand the role of the code manager
* Read and understand the Monies policy
* Understand this role is volunteer
* To work collaboratively with other Wellington GymSports Managers both before, during and after the event
* To attend the full time of nationals – Women’s Artistic 4th – 9th of October, and Men’s Artistic 5th – 9th of October in Nelson, Rhythmic 5th – 9th of October – Auckland, 11th – 15th of October – Christchurch

**Please Note**: If you have been a Code manager in 2016 please skip to section two.

**Section One - Applicants Details**

Name (First and Last)

Are you a parent of athlete? If so what level or step are they? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If you are unsure if they are moving up please right down both)

Contact details: Landline:

 Mobile:

Email:

**Relevant Experience**

**Personal Strengths and Abilities/Key Skills**

**General – any other comments**

**Please complete Section Three and Four.**

**Section Two *(Past Managers Only)***

Are you a parent of athlete? If so what level or step are they? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (If you are unsure if they are moving up please right down both)

You’re contact numbers:

Landline:

 Mobile:

Email:

**Section Three – Consent**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name) understand under the Child protection Act, I may be required to undergo Police Vetting process.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name) confirm I have a full, clean drivers licence and understand as part of the role I will be required to drive a van to transport athletes.

**I,** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name) would like to apply for the position of GymSports Wellington Code Team Manager **(please highlight which code you are applying for)** Women’s Artistic / Men’s Artistic / Rhythmic/ Trampoline

Signature of Nominee:

Date:

**Section Four - Club Details**

These details need to be completed by your Member Club for submission with the rest of this form.

Name of Club representative:

Name of Club: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent of athlete? If so what level or step are they? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Contact Numbers: Contact Landline:

 Mobile:

 Email: