

# Motorcycling Western Australia (Inc)

## NOMINATION FOR PANEL POSITION



PANEL NOMINATING FOR: \_\_\_\_\_

Name.....

Phone.....

Email.....

Which Disciplines are you involved with.....

Relevant experience.....

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Why do you wish to join this committee.....

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NOMINEE Signature .....

DATE .....

Please note that nominations must be signed

Completed forms must be forwarded to the CEO of Motorcycling Western Australia.

Please provide as much background information as necessary to enable the board of Motorcycling Western Australia to best consider your application. You may attach further supporting information.

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