Coordinator Nomination Form

Townsville Castle Hill Touch Association Inc.
trading as
Townsville Touch Football
The Secretary
P.O. Box 7576, GARBUTT Qld 4814.
Email: jan@townsvilletouch.com

I, _____ am a financial member of _____
(Name of Nominee) (Name of Club or Team if applicable)

and hereby nominate for the following position of the Townsville Castle Hill Touch Association Incorporated.

For the position of: *(Please click on the relevant box)*

- ☐ Disciplinary Coordinator
- ☐ Publicity and Promotions Coordinator
- ☐ Representative Coordinator
- ☐ Coaching Coordinator
- ☐ Referees' Coordinator - (position recommended by TTRA)
- ☐ Juniors' Coordinator - (position recommended by TJT)
- ☐ All Abilities' Coordinator - (position recommended by Happy Touch TSV)
- ☐ Other _____
(List Position)

at the Annual General Meeting of the Townsville Castle Hill Touch Association Incorporated to be held on Tuesday, 28 October 2025 (Date of Meeting) at TCHTA Clubhouse, 33A Paxton Street, Townsville. (Address of Meeting)

or at any adjournment or postponement thereof.

Qualifications for the Position:

Signature of Nominee: _____ Date: _____

NOMINATIONS FOR COORDINATOR POSITIONS MUST BE RECEIVED BY THE SECRETARY AT LEAST SEVEN (7) DAYS PRIOR TO THE ANNUAL GENERAL MEETING.

For Office Use Only:

Date nomination received: / /