

2022

Bendigo Bank

Community Bank
Merbein & District



Northern Mallee Sports Star Awards

Annual Award Nomination Form

Athlete with a Disability

Nominee Name: _____ D.O.B: ____ / ____ / ____
(Optional)

Club/Association: _____

Nominee Postal Address: _____

Nominee Email Address: _____

Telephone Details: BH _____ AH _____

Nominator - Contact Person: _____

Nominator Postal Address: _____

Telephone Details: BH _____ AH _____

Email Address: _____

Sport: _____

Declaration: I hereby certify that the factual information contained in this nomination is, to the best of my knowledge, true, correct and meets the award guidelines and criteria.

Signature of Club/Association representative: _____

Contact Name: _____

Position: _____ Date: ____ / ____ / ____

PLEASE PROVIDE FURTHER NOMINATION DETAILS OVER PAGE

Supporting Information to Nomination (please address all criteria)

Criteria One:

Open to people with a disability in the Northern Mallee Region?

(please tick) Yes

No (ineligible)

Disability:

Criteria Two:

Is a member of a registered Northern Mallee Region Club/Association?

(please tick) Yes

No (ineligible)

Name of Club/Association:

Criteria Three:

Has shown talent and enthusiasm for their sport. How? Why? What? Other details ie results, competition level, number in competition etc?

Empty text area for Criteria Three details.

Criteria Four:

A good role model. How? What? Other details?

Empty text area for Criteria Four details.

Criteria Five:

Has performed well at local, state, national or international level. What? Where? Other Details?

Empty text area for Criteria Five details.

ATTACH SEPARATE PAGES IF NECESSARY

Nominations should be forwarded as follows:



Post: **Mallee Sports Assembly
PO Box 2316
Mildura 3502**

In Person: **101-101A Ninth Street Mildura**
Phone: **03 5021 3464** Fax:

Email: **info@malleesportsassembly.org.au**

**2022 Annual Award
Nominations close 5pm
Friday 13th January 2023**

PARTICIPATE - FEEL GREAT!