The Ski Club of Victoria (ACN 004 239 721)







Candidate Information

Name		Any former names			
Home address					
Email					
Mobile				Other phone	
Date of birth			P	lace of birth	
Current employment/position					
Relevant experience:					
redevant experience.					
Please tick any of the following skills, experience or background you have:					
■ Snowsports		s or other sports administration		Membership management	
	Hospitality, f	pitality, food & beverage or accommodation		Marketing or communications	
	Finance or a	accounting		Business management or administration	
	Legal			Property, architecture, development or construction	
	Contacts in	Alpine industry, government or Mt Buller		Other (specify)	
Affiliations or organisations you belong to (eg memberships, professional, civic):					
Your vision for the SCV and what you could contribute to the Board:					
Statement by Naminas					
Statement by Nominee I consent to being nominated as a director of the Ski Club of Victoria. I confirm that I am not bankrupt and have not					
been disqualified from managing a corporation.					
Signed Dated					
Nomination					
	inated by	Full or life member		Full or life member	
Nam	e				
Date					
Phone					