

Att: **Sean Atkinson**

Commercial Partnerships & Communications Manager
AFL Barwon
sean@aflbarwon.com.au

AFL Barwon Region Commissioner Nomination Form

Name of Region Commission:	AFL Barwon
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Personal Details:

Family name:	
Given name:	
Residential address:	
Date of Birth:	
Place of Birth:	
Contact Details	Best phone:
	Best email:

Personal Profile*:

Employment Background:	
Sport / Football Background:	
Other relevant experience:	

AFL BARWON

I, the above mentioned nominee/appointee, take this position with the understanding that I am unable to hold any other governance position within a football League, Club or Umpiring association within this Region while on this Region Commission. I will at all times act in the best interests of football within this Region and uphold the core AFL Barwon values of progressive, respectful and accountable.

Nominee/Appointee Name

Signed

Date

This nomination/notification has been provided to AFL Barwon by the authorised person below who provides the explanation below as to how the person emerged and was supported from within the Region.

Authorised Person

Signed

Date

Position

By signing and dating this Form below, an authorised representative of AFL Barwon has acknowledged the notification:

Authorised AFL Barwon
Representative

Signed

Date

*Please use additional pages if needed to complete your application