SHIRE OF HARVEY
A Breath of Fresh Air

Advisory Group Nomination Form

Name of Advisory Group: Sport and Recreation

Please complete 'Part A' **or** 'Part B', whichever is appropriate:

PART A – Organisation Representative ***(fill out only if you are a representative of an organisation)***			
Organisation Name:			
Delegate Name:			
Address for Correspondence:			
Telephone:	(Work)	(Home)	(Mobile)
Email:			
Deputy Delegate:			

PART B – Individual Representative ***(fill out only if you are an individual wishing to nominate for an Advisory Group)***			
Name:			
Address:			
Telephone:	(Work)	(Home)	(Mobile)
Email:			

Please describe why you would like to be a member of the Advisory Group.

Do you have any skills and/or experience that may assist you in this role?

Meeting attendance: By providing your contact details you are committing to attending three meetings per year. If you cannot attend (in person or on Microsoft Teams) and you are representing a club, you can provide a proxy to represent your sporting club in your absence.

Signed _____ **Date** _____

Please email completed forms to: communitydevelopment@harvey.wa.gov.au

For further information, please call the Community Development team on 9279 0356