



KANGAROOS JUNIOR RUGBY LEAGUE CLUB

Position Application Form

MANAGEMENT COMMITTEE

CONTACT DETAILS

First Name: _____ Surname: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Mobile: _____ Email: _____

Blue Card No.: _____ Expiry Date: _____

Current Membership details: _____
Club membership

Signature _____ Date: _____

POSITION (Please tick relevant box)

EXECUTIVE:

D President

D Vice President

D Secretary

D Treasurer

Please tick the box to indicate you will abide by, and uphold the rules of Kangaroos Junior Rugby League Club

Please tick the box to indicate you understand and accept the responsibilities for the position you have applied for _____

Proposing Members

(MUST BE A CURRENT MEMBER OF Kangaroos)

Proposed By: (please print) _____

Signature: _____

Seconded By: (please print) _____

Signature: _____

Committee Endorsement

Date: _____

Approved D

Not Approved D