

New Zealand Darts Council Inc

Application for Director

Applications to be forwarded to Secretary, NZ Darts Council Inc, P O Box 42042, Wainuiomata 50490 or emailed to nzdarts@xtra.co.nz

| Name: | | | | |
|---------------------|---------------------------|--------------------|---------------------------|-------------------|
| Member o | f | | | Darts Association |
| Age: | | | | |
| Address: _ | | | | |
| Telephone | : Private | | Business | |
| | Mobile | | Email | |
| Details of involver | ment in Darts | | | |
| Reasons for apply | ing for the position | | | |
| | | | | |
| | | | | |
| I have read the job | description for the posit | ion and agree to c | omply with the requiremen | ts |
| Signed: | | Applicant | Nominated by: | Association |
| Ciana ad. | | Compton | A a a a a t a d . | A |