

**NOMINATION FORM FOR AUSTRALIAN/NEW ZEALAND TEST MATCH**

**TO BE HELD IN MOUNT MAUNGANUI, NEW ZEALAND**

**ON 15/17 MAY 2015**

**NAME:-** .....

**ADDRESS:-**.....

**PHONE:-**..... **MOBILE:-**.....

**EMAIL:-**.....

**POSITION I WOULD LIKE TO BE CONSIDERED FOR:-**

.....  
**ACHIEVEMENTS DURING THE LAST FIVE (5) YEARS**

**STATE:-**  
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**NATIONAL:-**  
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**INTERNATIONAL:-**  
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**DECLARATION:-** If chosen I am willing to attend any selection trial / and or any practice that may be arranged by the AIBBC.

I have read and agree with the Code of Conduct and Appeals guidelines enclosed

**SIGNATURE:-**.....**DATE:-**.....

APPLICATIONS ARE TO BE MADE THROUGH YOUR STATE SECRETARY AND  
FORWARDED TO THE AIBBC SECRETARY NO LATER THAN 1<sup>ST</sup> AUGUST 2014