



# NRAA TEAM NOMINATION

This is a generic nomination form to be used for TR, FO, FTR, FS and MR.

## NOMINATION DETAILS

I AM NOMINATING FOR THE:

\_\_\_\_\_  
\_\_\_\_\_  
(insert team name and discipline above)

COMPETITION LOCATION:

\_\_\_\_\_  
(insert competition location above)

TEAM:

Open  Veterans  Under 25

F Open  FTR

POSITION:

Manager  Coach  Shooter

## PERSONAL DETAILS

<b>Surname</b>			<b>Given Name/s</b>	
<b>Address</b> <small>(please include street address, State and postcode)</small>				
<b>Postal Address</b> <small>(if the same as above, please write "as above")</small>				
<b>Telephone</b>	Home	Work	Mobile	
<b>Email Address</b>				
<b>Rifle Club</b>			<b>Date of Birth</b> <small>(mandatory for U25 nominations)</small>	

## NOMINATION SUBMISSION DETAILS

The completed Nomination Form must be returned to the NRAA by the advertised due date, via:

Email: [nominations@nraa.com.au](mailto:nominations@nraa.com.au)

## IMPORTANT - PLEASE READ

Do not attach your own nomination form that repeats information in a different format or includes detail of results from earlier than the period/s stated. It will not be considered.

## NRAA OFFICE USE ONLY

<b>Date Received</b>	/ /	<b>Details and Results Supplied</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Date Recorded</b>	/ /	<b>Additional Results Required</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

**ACHIEVEMENTS / RESULTS****AUSTRALIAN TEAM PARTICIPATION – Official Inc Veterans and Under 25**

Year	Location/Event	Team Position	Achievements / Relevant Comments

**NRAA TEAM PARTICIPATION**

Year	Location/Event	Team Position	Achievements / Relevant Comments

**STATE TEAM SHOOTING - National Teams Matches**

Year	Location/Event	Team Position	Achievements / Relevant Comments

**ACHIEVEMENTS / RESULTS - continued from page 2**

**INDIVIDUAL NATIONAL AND STATE CHAMPIONSHIP RESULTS - in previous 3 years**

Year	Location	Lead Up Score	Placed	Queen's/ King's Score	Placed	Grand Score	Placed

**NOMINEE'S DECLARATION**

I have completed the above application truthfully to the best of my knowledge and ability.

**Name** \_\_\_\_\_  
(please print)

**Date** \_\_\_\_\_

**Signature** \_\_\_\_\_

Please insert electronic signature above. If you do not have electronic signature capability, please complete the form electronically, print, sign and email back to the NRAA at [nominations@nraa.com.au](mailto:nominations@nraa.com.au)