



GRIFITH TOUCH ASSOCIATION INC
PO Box 1053, Griffith NSW 2680

2025/26 REPRESENTATIVE COACHES / MANAGERS APPLICATION FORM

NAME:	
ADDRESS:	
PHONE:	
EMAIL:	
COACHING ACCREDITATION:	

COACHING ACCREDITATION: 10s, 12s & 14s FOUNDATION (level 1); 16s & 18s TALENT (Level 2)

PLEASE NUMBER PREFERENCES (1, 2 or 3)

JSC TEAM	COACH	ASSIST COACH	MANAGER
10s Girls			
10s Boys			
12s Girls			
12s Boys			
14s Girls			
14s Boys			
16s Girls			
16s Boys			
18s Girls			
18s Boys			

EXPERIENCE SPECIFIC TO THE POSITION APPLYING FOR:

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WORKING WITH CHILDREN CHECK NUMBER.....

SIGNED: _____

DATE: _____

Return application form to admin@griffithtouch.com.au