

CHRISTIAN SCHOOLS SPORTS ASSOCIATION

APPOINTMENT OF CSSA STATE CONVENER

I,
(Name of Principal)

Principal of..... such school being
(Name of School)

a financial member of the Christian Schools Sports Association, do hereby approve the appointment of

..... as the CSSA State Convener for
(Name of State Convener)

.....
(Name of Sport(s))

I understand the responsibilities & commitment that are required from a CSSA State Convener and fully support this appointment.

Signed:
(Signature of Principal)

Position: Date:

STATE CONVENER DECLARATION

I,hereby accept the appointment as the
(Name of State Convener)

CSSA State Convener for
(Name of Sport(s))

I understand the responsibilities & commitment that are required from a CSSA State Convener and will fulfil these duties to the best of my ability.

Signed:
(Signature of State Convener)

Position: Date:

Please return to Linda Heslehurst CSSA Executive Officer

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