



**VICTORIAN LADIES' BOWLING ASSOCIATION
COACHES BOARD REGISTER OF RECOMMENDATION/S OF PANEL MEMBERS**

FOR RATIFICATION BY THE VLBA COACHES BOARD

PLEASE ENSURE THE CANDIDATE/S SIGNS THE DOCUMENT

DCC CHAIRMAN _____

DATE FORWARDED _____

DISTRICT _____

PLEASE PRINT DETAILS

NAME	ADDRESS	TELEPHONE NUMBER	CLUB	COACH STATUS
I _____ am willing to accept a position on the DCC. signature				
I _____ am willing to accept a position on the DCC. signature				
I _____ am willing to accept a position on the DCC. signature				