

School Club Links Champion Application form

Details of proposed champion

Name:

Age:

Address:

Postcode:

Contact Number:

E mail address:

School:

T shirt size: S M L XL

Name of person nominating
(if appropriate)

Contact number:

E mail address:

In no more than 70 words, please give the reason why you feel you (or your club member) would be a good school club link champion

Please return this form to **your School Sports Coordinator who will then liaise with the club. A decision regarding the appointment of the School- Club Champion will be made within 4 weeks.**

For any queries regarding your application please contact **either your School Sports Coordinator or the School Sports Partnership Office on 01963 34396**