Highlands Soccer Association (Inc.)

ABN: 71 417 273 069 | Assoc. No: Y0535926

2026 HSA DIRECTOR NOMINATION FORM

DATE Thursday, 5 November 2026	**TIME** 6:00 pm
VENUE Mittagong RSL Club, 148–150 Old Hume Highway, Mittagong NSW 2575	
NOMINATIONS CLOSE **Thursday, 22 October 2026**	

The undersigned hereby nominate the person named below for the position of Director on the Highlands Soccer Association Board.

Authorised Representative 1 of an Association Member Club

Name: _____

Club: _____

Signature: _____

Date: _____

Authorised Representative 2 of an Association Member Club

The second authorised representative must represent a different Association Member Club.

Name: _____

Club: _____

Signature: _____

Date: _____

Nominee Acceptance

I confirm that I am an Individual Member of Highlands Soccer Association and accept nomination for election as a Director.

Nominee name: _____

Declaration of any position the nominee holds in a Club, including as an officer (howsoever described, including as a Delegate) or as an employee:

_____

_____

Nominee signature: _____

Date: _____

Completed nomination forms must be received by Thursday, 22 October 2026 and submitted to admin@hsa.org.au.