



**AGILITY DOG ASSOCIATION OF AUSTRALIA LTD**

ABN 83 070 415 404

**EXPRESSION OF INTEREST  
IFCS WAC - TEAM MANAGER**

MR/MRS/MISS/MS/DR SURNAME: ..... FIRST NAME: .....

MEMBERSHIP NO: ..... EMAIL: .....

POSTAL ADDRESS: .....

SUBURB: ..... STATE: ..... POST CODE: .....

PHONE: Work: ..... Home: ..... Mobile: .....

Please respond to the Selection Criteria outlined in the IFCS WAC Selection – Team Manager document (use a separate sheet if more space is required).

Detail past experience at an IFCS World Agility Championship in an official capacity (refer 2.3.6)

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Provide examples of situations in which you have demonstrated your administrative skills (refer 2.3.7)

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Provide examples of situations in which you have demonstrated your communication skills (refer 2.3.8)

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Provide examples of situations in which you have demonstrated your ability to gain a rapid understanding of IFCS processes for the conduct of the WAC (refer 2.3.9)

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State any other reasons you believe you should be selected to be Team Manager for Australia

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**Detail pre-existing injuries and/or conditions (physical or psychological) which may impact on your ability to undertake the Team Manager role (refer 5.3.2)**

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I declare that I will be over the age of 18 years on the first day of the IFCS World Agility Championships. I will be available for the full period of the WAC and, as required, to support the team in the months leading up to the WAC. I will (usually) be able to respond to email correspondence regarding the WAC within 36 hours. I will be able to meet all pertinent requirements of the IFCS WAC Selection – Team Manager document including passport, pre-entry visa requirements into the host country and medical insurance. I am prepared to accept all Roles and Responsibilities for the position of Team Manager. I acknowledge that any failure to disclose a known injury and/or condition which may impact on my ability to under the role will be grounds for removal from the Team and that ADAA reserves the right for me to undertake a medical examination at a medical professional of ADAA's choosing to confirm my "fitness" for the role.

**SIGNATURE:** .....**DATED:** .....

**THIS FORM MUST BE RECEIVED ON OR BEFORE 27 SEPTEMBER 2014. SEND TO:**

**By Post**

**CONFIDENTIAL – WAC SELECTION – TEAM MANAGER**  
**The Secretary**  
**Agility Dog Association of Australia Ltd**  
**PO Box 2212**  
**GAILES Qld 4300**

**By Fax**

**07 3281 0016**

**By Email**

**SUBJECT HEADER – WAC SELECTION**  
**secretary@adaa.com.au**