

Registration form for AFL Multicultural Ambassador Program:

(Please fill in BLOCK letters)

FIRST NAME:

LAST NAME:

COUNTRY OF ORIGIN:

LANGUAGES SPOKEN:

POSTAL ADDRESS:

SUBURB:

POST CODE:

PHONE:

FAX:

EMAIL:

POLO SHIRT (Please circle):

S	M	L	XL	XXL
---	---	---	----	-----

SEX

M	F
---	---

AFL CLUB SUPPORTED:

EXPLAIN IN 50 WORDS, WHY WOULD YOU BE SUITABLE FOR THIS ROLE?

PLEASE COMPLETE THE ABOVE NOMINATION FORM AND RETURN IT BY MAIL, EMAIL OR FAX TO:

AFL Multicultural Programs
GPO Box 1449
Melbourne Vic 3001

Fax: 03 9643 1878
Email: aflmulticultural@afl.com.au



MULTICULTURAL PROGRAM

www.afl.com.au/multicultural



www.facebook.com/AFLMulticulturalProgram



<https://twitter.com/AFLdiversity>

