

BMTA Life Membership – Nomination Form



This form is for nomination of a BMTA member for Life Membership of the BMTA. Any member of BMTA may submit this form via email to manager@bmta.com.au before 27 April 2026. Proposition for Life Membership should be based on a members long and continued service to The Association.

(Note: If you would like to complete this form digitally, please contact manager@bmta.com.au)

Criteria

To be eligible for Life Membership of BMTA, the person nominated must:

- be an affiliated member of the association
- be nominated by a team/club or the Executive
- have been a member of the association for a minimum of 10 years
- have provided outstanding service to the sport in playing, coaching, refereeing, administration or general volunteering support over a period of at least 10 years
- have provided a positive and lasting influence on touch football and the BMTA community
- be deemed to have ensured BMTA is a significantly better organisation because of their contributions

I have read the criteria and believe this nomination complies with all the given criteria. As such, I would like The Association to accept this nomination and consider the person nominated for Life Membership.

Section 1 – Nominator’s Details (Person completing this form)

Full Name	
Residential Address	
Phone Number	
Email Address	
Signature	

Section 2 – Nominees Details (Person being nominated for Life Membership)

I wish to nominate the following person for Life Membership to the Brisbane Metropolitan Touch Association in 2026.

Full Name	
Phone Number	
Email Address	

Whites Hill Reserve, Boundary Road, Camp Hill Qld 4152
PO Box 1167, Carindale Qld 4152
Ph: (07) 3397 5133
Email: manager@bmta.com.au
www.bmta.com.au

BMTA Life Membership – Nomination Form



Section 3 – Nominees Details

In order to be awarded Life Membership, the nominee must be approved by the BMTA Board of Management and voted in by the membership. In order to assist this process, please provide as much information about the nominee as possible and attach supporting documentation if required to support their nomination.

Highlight the nominee's roles, responsibilities and official positions within BMTA.	
Outline the skills and attributes they have brought to their roles and Touch Football in general.	
Name any awards and the year that they were received by the nominee.	
Detail the number of years' service they have given and in what capacity.	
Any further details to support the nomination.	

Whites Hill Reserve, Boundary Road, Camp Hill Qld 4152
PO Box 1167, Carindale Qld 4152
Ph: (07) 3397 5133
Email: manager@bmta.com.au
www.bmta.com.au

BMTA Life Membership – Nomination Form



Section 5 – Declaration

I, hereby declare that the information provided in this form is true and correct. I understand that the information supplied will be provided to the BMTA Board and members. I understand a vote will take place at the BMTA Annual General Meeting on May 11, 2026 at 6pm if the BMTA Board support the nomination for Life Membership and I may be required to attend the AGM.

Date: ____/____/____

Full Name: _____

Signature: _____