**North West Regional Competition Administrator**



**Application Form**

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| --- | --- | --- | --- |
| Name |  | Region |  |
| Address |  | | |
| Email |  | | |
| Telephone |  | | |
| BC Membership Number if applicable |  | | |

Please provide details of your experience in relation to the person specification:

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Please provide details of your knowledge and skills to support your application:

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Please provide any further details that you feel would support your application:

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**(Please submit to** [**administrator@bc-nw.co.uk**](mailto:administrator@bc-nw.co.uk) **by 23:59 on Friday 18th November 2022)**