

## Volunteer Commissioner Application Form

*Tick One*

- ATV Commissioner       Cross Country Commissioner       Enduro Commissioner  
 Motocross Commissioner       Trial Commissioner       Women's Commissioner

### 1. Personal Details

Full Name: \_\_\_\_\_

Postal Address:

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### 2. Involvement in the Sport

How long have you been involved in the sport?

\_\_\_\_\_

Please outline your involvement (e.g., rider, official, club member, administrator, volunteer, parent, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### 3. Skills & Experience

Please detail the skills, knowledge, and experience you bring that would add value to the Commissioner role:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



MOTORCYCLING NEW ZEALAND INC.  
211 Main Street, PO Box 253, Huntly 3740, New Zealand  
+64 7 828 7852 admin@mnz.co.nz www.mnz.co.nz



*Advancing the Sport of Motorcycling*

#### 4. Current Roles within Motorcycling New Zealand

Please list any current roles you hold within MNZ

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#### 5. Other Relevant Roles or Interests

Please list any external roles, affiliations, or business interests that may be relevant to this appointment:

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#### 6. Vision & Goals

Briefly outline your vision for the discipline and the goals you would seek to achieve if appointed:

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#### 7. Conflict of Interest Declaration

A conflict of interest exists where personal, financial, or other interests could influence—or be perceived to influence—your decision-making in the role.

Do you have any actual, potential, or perceived conflicts of interest?

- No
- Yes (If yes, please provide details below)

Details:

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- I agree to declare any new conflicts of interest that arise if appointed.

## 8. Availability & Commitment

Commissioners are expected to attend meetings, participate in calendar planning and permit approvals, support championship allocation, and collaborate with fellow commissioners and administration.

Please confirm your ability to commit to the responsibilities of this role:

Yes

No

Please note any limitations on your availability:

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## 9. Referees

Referee 1

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Referee 2

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## 10. Code of Conduct & Governance Acknowledgement

If appointed, I agree to uphold the rules, policies, and regulations of MNZ; act in the best interests of the sport; maintain confidentiality; conduct myself professionally and impartially; and support high standards of health, safety, and fair competition.

I agree

## 11. Declaration

I declare that the information provided in this application is true and correct to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Applications Close: Tuesday 31 March 2026**

Email to: [jannine@mnz.co.nz](mailto:jannine@mnz.co.nz)