



# RULE EXEMPTION FORM

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

Contact Name and Phone Number: \_\_\_\_\_

Age Group/Grade: \_\_\_\_\_

| <b>Specific Rule Exemption sought for</b>                             |
|---|
| <i>Rule number and definition that you are seeking exemption for:</i> |
| _____   |
| _____   |
| _____   |
| _____   |
| _____   |
| _____   |

| <b>Reason for request</b>  |
|--|
| <i>Please detail all information for exemption request review:</i> |
| _____  |
| _____  |
| _____  |
| _____  |
| _____  |
| _____  |

This Form is to be completed and returned to SANFL Juniors PO Box 606 Tynte Street, North Adelaide, SA 5006 or [sanfljuniors@sanfl.com.au](mailto:sanfljuniors@sanfl.com.au)

**Please Note:** All rule exemption applications will be reviewed by the SANFL Juniors Team and are subject to the [SANFL Junior Competition Rules & Regulations](#).