

AGE EXEMPTION FORM PLAYING UP

COMMUNITY FOOTBALL

Please complete all of the below fields, including relevant information in as much detail as possible along with any other necessary documentation attached.

Incomplete forms or forms with inadequate information will not be granted.

First Name:		Surname:	
Club:		Date of Birth:	
Home Address:			
Contact Phone:		Contact Email:	
Height (cm):	Weight (kg):	Current Age Group:	
		Age Group Applying to Play in:	
· •		all experience: (Club, School, Auskick etc) how long they have played), and ability levels of the play	ver.
Please tick which of t	he following reasons is	s applicable to the application:	
Player Ability / Experie	ence (Please complete th	ne above Previous History)	
Team Numbers (Please	e submit a full team list	to SANFL Juniors including players Dates of Birth)	
Personal/Family (Pleas	se state)		
Other (Please state)			



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With reference to the tick boxes previous, papplication, referencing relevant supporting	•	
Declaration		
	have submitted the above application for p	
	ay in theFootb	
	the reasons stated above. I believe that this player	•
meets the necessary criteria, and it is most ap	propriate for them to play within this age group.	
Club acknowledges Parent/Guardia	n approval for Playing Up Exemption Request	
Name of Club Official	Role of Club Official	
Signature of Parent/Guadian	Date	
Signature of Club Official	 Date	

Form to be completed and returned to Controlling Body Details

Please Note: All permit applications will be reviewed by the Controlling Body and are subject to the Controlling Body's By-Laws and the Community Football Rules & Regulations.