Busselton District Junior Football Association

FORM PU: APPLICATION TO PLAY UP (个) A YEAR GROUP

2020

IMPORTANT INSTRUCTIONS:

- 1. In accordance with Competition By-laws and subject to approval by the Association, a player *may* be permitted to play-up to a higher year group that is ONLY ONE (1) YEAR GROUP higher than their assigned year group. For example, a Year 3 player may play in a Year 4 grade but *not* in a Year 5 grade.
- 2. A player wishing to play in a year group higher than their assigned year group must first receive written approval from the Association.
- 3. The application is to be made by the Club on behalf of the player.
- 4. The application must be signed by the player's parent or legal guardian; and a club official (President, Secretary or Registrar).
- 5. Documents to be attached to include a Club letter of support, playing history and other documentation that the Club thinks is relevant
- 6. The completed form and attachments to be forwarded to the BDJFA Registrar by email (registrar@bdjfa.org.au) as a scanned file in PDF format.
- 7. Unless the Association expressly states otherwise, the play-up application, if approved, is valid for the current season only.

THE PLAYER MAY NOT PLAY-UP A YEAR GROUP UNTIL WRITTEN APPROVAL IS RECEIVED BY THE CLUB FROM THE ASSOCIATION.

DETAILS OF PLAYER TO WHICH THIS APPLICATION APPLIES ("the Player")

FULL NAME including middle name:				
Date of birth:				
Email address:				
Phone:				
The Player's height and weight:	Height:cr	n. <i>Weight:</i>	kg. – MUST be measured by a Club offici	
The Club that the Player is registered with ("the Club"):				
PLAY-UP APPLICATION The Club applies for the Player to play-up a grade and play in the following Year Group and team:				
The Club applies for the Player to play-up a grade and play in the following real dioupand team.				
The primary reason for this play-up application is:				
This application is made by the Club with my consent and all information supplied is true and correct.				
Signed (Parent/ Legal Guardian):		Date:		
Print name:		Telephone:	Telephone:	
This application is made by the Club on be	half of the Player.			
Signed Club Official:		Date:	Date:	
Print name:		Telephone:		
Position (tick one): ☐President ☐Secret	ary □Registrar	Email:		
Attach to this application a letter of support from the Club, signed by a club official. The letter is to detail the player's				

Attach to this application a letter of support from the Club, signed by a club official. The letter is to detail the player's playing history.

ASSOCIATION USE ONLY		
Registration ID:		
Date received from Club:	Received by: \Box email (scanned), \Box facsimile, \Box hand, \Box post.	
Application granted. If refused, state reason:	□ Club	
needs to apply again next season, or		
☑ Play up valid for (number of seasons): \Box 1, \Box 2, \Box 3, \Box 4, \Box All Juniors		
Date Club notified:	Notified by: \Box email, \Box facsimile, \Box hand, \Box post. Association	
Registrar:		

Last updated:26th June 2020 JH.