NSW Community Rugby Leagues Association



PLAYING IN HIGHER AGE GROUP CONSENT FORM

APPLICATION TO PLAY	☐ 1 YEAR UP	☐ 2 YEARS UP
PARENT/GUARDIAN TO COMPLETI	<u>E</u>	
hereby give permission for my child		
	DOB	/ to play with the
(insert full name)		
	Under	(insert higher age division)
(insert Club)		(insert higher age division)
	ired to fulfil his obligations to his	y and mentally by playing in a higher age correct age division prior to competing i
Parent/Guardian Name		
Parent/Guardian Signature		Date
LUB TO COMPLETE		
On behalf of the(insert C		IRLFC
(insert C	Club name)	
hereby give permission for the aboveme	entioned player to play with the U	Inder in 20
am aware of and have explained the inc player and his parent/guardian.	reased mental and physical risks	of playing a higher age division to both ti
Club Representative Name		
Club Representative Signature		Date
GROUP. APPLICATIONS THEN NEED TO BE BE ACCEPTED WITHOUT THE REQUIRED A	COACH OUTLINING THAT THE ABO TO PARTICIPATE IN A COMPETITION EAPPROVED BY THE PLAYERS DIS	
DISTRICT TO APPROVE		
eague Secretary Signature		Date
NSWRL TO APPROVE (FOR APPLICATION SWRL Representative Signature		.

FOR PLAYERS PLAYING UP **ONE YEAR ABOVE THEIR NATURAL AGE GROUP** COMPLETED FORMS CAN BE SUBMITTED TO THE DISTRICT AT THE EARLIEST CONVENIENCE AFTER THE PLAYER HAS PARTICIPATED – FORM WILL BE SIGNED BY DISTRICT AND UPLOADED TO THE PLAYERS MYSIDELINE MEMBER RECORD

FOR PLAYERS PLAYING UP **TWO YEARS ABOVE THEIR NATURAL AGE GROUP** FORMS MUST BE SIGNED AND APPROVED BY DSITRICT AND NSWRL PRIOR TO PLAYER TAKING THE FIELD IN THE HIGHER AGE GROUP