

PLAYER PERMIT FORM - JUNIORS

Please read all details carefully and contact the Association for further information if needed.
Incorrectly completed and processed forms may result in penalties per Association By-laws.

PLAYER DETAILS	
Full Name:	D.O.B
Address:	Postcode
Telephone:	Email:
Parent/Guardian Name:	Parent/Guardian Signature:
Club Authorised Officer Name:	Club Authorised Officer Signature:
Telephone:	Email:
(Parent / Guardian to sign if applicant is under 18 years)	

PERMIT (*P) REGISTRATION APPLICATION
As a registered of: ----- Hockey Club
Would like to apply for a Permit to play for: ----- Hockey Club; with their: ----- (Please Indicated Junior Division & Grade)

REASON FOR PERMIT

OFFICE USE – Eastern Goldfields Hockey Association Inc.	
Confirmation of receipt of application	
Officials Name: Please Print	Club Position:
Signature:	Receival Date Receival Time:
Date Applied to SportsDesq:	Initials of Officer:

1. Player current Club's authorised officer to complete form with player's family
2. Form be sent to Junior Committee to be registered with the Competitions Records of the Association.
3. Signed Form is forward via email to:
juniors@goldfieldshockey.com.au or handed to Committee Convenor directly or through the Association Office.
4. The Eastern Goldfields Hockey Association will contact Clubs once the form has been received and registered.
5. Note: Players name on match-card should be indicated with Asterix P (*P) as Permit Player.