Player Permit Request

**All Permit applications must be emailed to** [**secretary@hockeywarrnambool.org.au**](mailto:secretary@hockeywarrnambool.org.au)

***No later than 5pm on the Wednesday prior to game day***

**REQUESTING CLUB CONTACT INFORMATION**

|  |  |
| --- | --- |
| Club: | |
| Name of Club Official: | Position at Club: |
| Email: | Phone: |

**PERMIT APPLICANT INFORMATION**

|  |  |  |
| --- | --- | --- |
| Permit Applicant’s Name |  | DOB: |
| Permit Applicant’s Current club |  | |
| Permit requested for Team |  | Match date: |

**REASON FOR PERMIT APPLICATION – TICK ONE AND GIVE DETAILS/REASONS**

|  |  |
| --- | --- |
| Play Lower Age Group (Jnr) |  |
| Club Transfer | TRANSFER REQUESTS MUST BE SIGNED BY THE PRESIDENT OR SECRETARY OF BOTH CLUBS PRIOR TO SUBMISSION |
| Finals Exemption |  |
| other |  |

Club Requesting the Player transfer or Permit

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Club approving the transfer of the player

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OFFICE USE:**

|  |  |  |  |
| --- | --- | --- | --- |
| PERMIT APPLICATION: | Date Received: Time: | APPROVED: RULE: | DENIED: RULE: |
| Match Card Recording Requirements: | Permit number in the column next to the permit player’s name on the match card for the match for which the permit was approved | | |