NSWRL PLAYING IN HIGHER AGE GROUP CONSENT FORM

PARENT/GUARDIAN TO COMPLETE

I / We hereby give permission for my/our child

	DOB	/	/	to play with the
(insert full name)				
	Under			
(insert Club)			(insert high	er age division)
I/We are aware of the increased risk my child we mentally by playing in a higher age division.	will be expo	osed to	both phy	ysically and
I/We are aware that my child is required to full prior to competing in the higher age division.	il his oblig	ations	to his coi	rrect age division
Parent/Guardian Name				
Parent/Guardian Signature				Date
CLUB TO COMPLETE				
On behalf of the				JRLFC
I hereby give permission for	(insert playe	er's name	<u></u>	
To play with the				
I am aware of and have explained the increase higher age division to both the player and his p			rsical risk	rs of playing a
Club Representative Name				
Club Representative Signature			D	ate
DISTRICT TO APPROVE				
Junior League Secretary Signature			C	Date

THIS FORM IS TO BE COMPLETED AND RETURNED TO THE JUNIOR LEAGUE SECRETARY FOR APPROVAL **PRIOR** TO THE PLAYER PLAYING IN A HIGHER AGE DIVISON