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ENGLAND NETBALL AGE BANDING APPLICATION

Country Beginn London & Elimentor to Play in Age Group U16 Competition Competition LSE U16 REGIONAL LEAGUE Contact details of person completing form: Name: Address: Post Code:	Na	ame of Player		Club			
Requesting to Play in Age Group U16 Competition ESE U16 REGIONAL LEAGUE Contact details of person completing form: Mobile: Post Code:	Сс	punty		Region	LONDON	1&SE	
Name: Address: Post Code:	Da	ate of Birth		EN member no			
Name: Address: Post Code:	Requesting to Play in Age Group U16			Competition	LSE U16 REGIONAL LEAGUE		
Name: Address: Post Code:	0	h					
Home Telephone: Mobile:	Cor	itact details or person completing form:					
Home Telephone: Mobile: Email: Ema	Na	ame:	Ad	ldress:			
The following must be completed and returned to the Competition Organiser of the competition the player is being considered to play in before the player is eligible to play out of their age band. By completing this form, you are determining that this player is suitable to play above their current age band. Please refer to the Age Banding Guidance and Support document before completing this form. 1) Is the player currently in the England Performance Pathway (e.g. Satellite, County, Regional Academy)? 2) Please state the level of the Performance Pathway the player is currently in, and the venue of the Academy 3) What level of competition is the player currently involved in? 4) What is the reason for the age band request? 5) Who will support/mentor the player during the process for her feeling of 'ease' with the transition? 6) What monitoring strategy has been agreed by all interested parties? Please complete and tick the appropriate box • The player has shown the physical ability to compete at a higher level • The player has shown the emotional ability to transition to a higher age band • The player has the technical and tactical ability to take part at the level of the higher age band • The player will have their progress regularly monitored • The team Coach has discussed this application with the player, the Club Safeguarding Officer, and the player's parent(s) / guardiar(s) Signed: Coach Club Safeguarding Officer Parent					Post	Code:	
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Club Safeguarding Officer Parent	··			layer, the Club Safeguard	ing Officer	r, YES NC)
Parent	Si	gned:				Coach	
						Club Safeguarding O	fficer
Date:						Parent	
	Da	ate:					

NB: Please note that approval is not needed for this process. Completion and submission of this form will act as approval for the player to play out of their age band, providing it is completed in full and received by the competition organiser within the timescales they permit. Please refer to the competition regulations before submitting this form. For queries relating to age banding please contact:

England Netball SportPark | 3 Oakwood Drive | Loughborough | LE11 3QF T: 01509 27785