NSW Community Rugby Leagues Association

PLAYING IN HIGHER AGE GROUP (TACKLE) CONSENT FORM

APPLICATION TO PLAY	☐ 1 YEAR UP	☐ 2 YEARS UP

☐ **CASUAL APPLICATION** *(player will play up occasionally throughout the season)*

☐ **PERMANENT APPLICATION** *(player will be playing up all season and will not participate in their natural age group)*

PARENT/GUARDIAN TO COMPLETE

I hereby give permission for my child

_____ DOB _____/_____/_____ to play with the
(insert full name)

_____ Under _____
(insert Club) (insert higher age division)

I am aware of the increased risk my child will be exposed to both physically and mentally by playing in a higher age division. I am aware that my child is required to fulfil their obligations to their correct age division prior to competing in the higher age division (if playing up an age group on a casual basis).

Parent/Guardian Name _____

Parent/Guardian Signature _____ Date _____

CLUB TO COMPLETE

On behalf of the _____ *JRLFC*
(insert Club name)

I hereby give permission for the abovementioned player to play with the Under _____ *in 20*_____.

I am aware of and have explained the increased mental and physical risks of playing a higher age division to both the player and their parent/guardian.

Club Representative Name _____

Club Representative Signature _____ *Date* _____

PLEASE NOTE: IF A PLAYER IS PLAYING TWO YEARS ABOVE THEIR NATURAL AGE GROUP CLUBS MUST ATTACH A WRITTEN LETTER FROM A SENIOR CLUB COACH OUTLINING THAT THE ABOVEMENTIONED PLAYER HAS THE APPROPRIATE SKILLS AND PHYSICALITY TO PARTICIPATE IN A COMPETITION TWO YEARS ABOVE THEIR NATURAL AGE GROUP. APPLICATIONS THEN NEED TO BE APPROVED BY THE PLAYERS DISTRICT AND NSWRL. APPLICATIONS WILL NOT BE ACCEPTED WITHOUT THE REQUIRED ACCOMPANYING LETTER. APPLICATIONS TO PLAY UP 2 YEARS FOR PLAYERS IN MODIFIED AGE GROUPS (U6-U12) WILL NOT BE CONSIDERED AS PER THE NRL LAWS OF THE GAME.

DISTRICT TO APPROVE

League Secretary Signature _____ Date _____

NSWRL TO APPROVE (FOR APPLICATIONS TWO YEARS ABOVE NATURAL AGE GROUP)

NSWRL Representative Signature _____ Date _____

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 DISTRICT AND NSWRL PRIOR TO PLAYER TAKING THE FIELD IN THE HIGHER AGE GROUP

NSWRL Community Rugby League

PLAYING IN HIGHER AGE GROUP (TAG) CONSENT FORM

APPLICATION TO PLAY	☐ 1 YEAR UP	☐ 2 YEARS UP	☐ 3 YEARS UP

☐ **CASUAL APPLICATION** *(player will play up occasionally throughout the season)*

☐ **PERMANENT APPLICATION** *(player will be playing up all season and will not participate in their natural age group)*

PARENT/GUARDIAN TO COMPLETE

I hereby give permission for my child

_____ DOB _____/_____/_____ to play with the
(insert full name)

_____ Under _____
(insert Club) (insert higher age division)

I am aware of the increased risk my child will be exposed to both physically and mentally by playing in a higher age division. I am aware that my child is required to fulfil their obligations to their correct age division prior to competing in the higher age division (if playing up an age group on a casual basis).

Parent/Guardian Name _____

Parent/Guardian Signature _____ Date _____

CLUB TO COMPLETE

On behalf of the _____ JRLFC
(insert Club name)

I hereby give permission for the abovementioned player to play with the Under _____ in 20_____.

I am aware of and have explained the increased mental and physical risks of playing a higher age division to both the player and their parent/guardian.

Club Representative Name _____

Club Representative Signature _____ Date _____

PLEASE NOTE: FOR BLUES TAG COMPETITIONS, PLAYERS MAY PARTICIPATE IN COMPETITIONS A MAXIMUM OF 3 YEARS ABOVE THEIR NATURAL AGE GROUP (i.e. A PLAYER TURNING 12 THIS YEAR MAY PLAY IN AN UNDER 15s COMPETITION BUT NOT AN UNDER 16s COMPETITION).

DISTRICT TO APPROVE

League Secretary Signature _____ Date _____

FOR PLAYERS PLAYING UP **IN BLUES TAG COMPETITIONS** COMPLETED FORMS SHOULD BE SUBMITTED TO THE DISTRICT AT THE EARLIEST CONVENIENCE – FORM WILL BE SIGNED BY DISTRICT AND UPLOADED TO THE PLAYERS MYSIDELINE MEMBER RECORD

ONCE DISPENSATION HAS BEEN GRANTED, PLAYERS WILL BE ABLE TO BE ADDED TO TEAM LISTS AND TEAM SIGN ON SHEETS