Hockey Albury-Wodonga

ABN: 72 893 760 500

CLUB PERMIT REQUEST - MULTIPLE

Registered Club:			
Player's Name:			
Date of Birth:	/ /	Current Grade::	
Player's Name:			
Date of Birth:	/ /	Current Grade::	
Player's Name:			
Date of Birth:	/ /	Current Grade::	
Player's Name:			
Date of Birth:	/ /	Current Grade::	

Detailed Reason For Request:

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If this application is for children to play out of outside their expected age group or gender, a parental permission form must be attached. Use and attach a separate sheet if not enough space for request

Club Secretary Name: ..... Signature: .....

Date: ....

Please forward the completed form to the Hockey Office email – admin@haw.net.au

OFFICE USE ONLY

Permits Co-ordinator comments: .....

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REQUEST No: PAN.....

Approved: YES/NO Date Response Sent To Club: .....

P.O. Box 386 Albury NSW 2640 Australia
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