



OVER AGE PLAYING DOWN CONSENT & APPROVAL FORM

For first year Bantam (14yrs old as at 31st December) to play down into Peewee

For first year Midget (16yrs old as at 31st December) to play down into Bantam

SECTION 1 - TO BE COMPLETED BY PLAYER/ MEMBER

I, _____ (family & given name), born ____/____/____ and registered in (Grade) _____ request permission to participate in the (lower grade) _____

Competition conducted by IHNSW. I acknowledge that the current By-Laws of IHNSW have been adopted by the members of IHNSW out of concern for orderly play of the game of ice hockey and the safety, health and welfare of all participants. I acknowledge that by being older than the nominal age specified by the IHNSW By-Laws, I must ensure not to expose any players to an increased risk of injury, or damage to my own health.

SIGNED: _____

DATE: ____/____/____

SECTION 2 - TO BE COMPLETED BY PARENT/ LEGAL GUARDIAN OF THE ABOVE

I, _____, being the parent/ guardian of the above undersigned player acknowledge the responsibility for ensuring not to expose players to increased risk by playing down in the above-mentioned grade.

SIGNED: _____

DATE: ____/____/____

SECTION 3 - TO BE COMPLETED BY THE **TEAM COACH** OF THE **REGISTERED AGE GRADE**

I, _____, being the Team Coach for (Club) _____ (Team) _____, of which the above undersigned player is a registered member, acknowledge this player's application and commitment to safe play in the lower age grade. I believe the above undersigned player is genuine in their request to play in the lower grade, and give my approval for them to play in the lower grade.

SIGNED: _____

DATE: ____/____/____

SECTION 4 - TO BE COMPLETED BY THE **TEAM COACH** OF THE **LOWER GRADE**

I, _____, being the Team Coach for (Club) _____ (Team) _____, of which the above undersigned player is a prospective team member, acknowledge this player's request and their undertaking for safe play in this lower age grade. I hereby give my approval for the above undersigned to play ice hockey in the nominated lower age grade.

SIGNED: _____

DATE: ____/____/____

SECTION 5 - TO BE COMPLETED BY AN ELECTED CLUB OFFICIAL

I, _____, being an elected Club Official member for _____ (Club) of which the above undersigned player is a registered member, acknowledge the possible risks involved and give the approval of the Club along with the player's parents/ guardian, Team Coaches and Managers, to play DOWN in the nominated lower age grade.

SIGNED: _____

DATE: ____/____/____

ALL PLAYING DOWN REQUESTS MUST BE SUBMITTED TO THE IHNSW EXECUTIVE FOR APPROVAL

ALL APPROVALS ARE SUBJECT TO EXECUTIVE REVIEW THROUGHOUT THE ENTIRE SEASON