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| **England Netball 2017-18 Age Banding Application Form** | | | | | | |
| Name of Player | |  | | | Club/School |  | | |
| County | |  | | | Region |  | | |
| Date of Birth | |  | | | Today’s Date |  | | |
| Requesting to Play in Age Group | | |  | | Competition | **U16 RL Qualifying Tournament 2017** | | |
| Contact details of person completing form: | | | | | | | | |
| Name: | | | | Address: | | | | |
|  | | | | | | | Post Code: | |
| Home Telephone: | | | | | Mobile: | | | |
| **Email:** | | | | | | | | |

The following must be completed and returned to **Jenny Harrold (jennyharrold@btinternet.com)** 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)? | YES □ Please proceed to question 2  NO □ Please proceed to question 3 | |
| 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? | Name | Position |
| 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 | YES |  | NO |  |
| * has shown the emotional ability to transition to a higher age band | YES |  | NO |  |
| * has the technical and tactical ability to take part the level of the higher age band | YES |  | NO |  |
| * progress will be regularly monitored | YES |  | NO |  |
| * The Team Coach has discussed this application with the player, the Club/School | YES |  | NO |  |
| Safeguarding Officer and the players’ parent(s)/guardian(s) (if the player is Under 18 years of age) | | | | |

|  |  |  |
| --- | --- | --- |
| Signed: |  | Coach |
|  |  | Club/School Safeguarding Officer |
|  |  | Parent |

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 Jenny Harrold within the timescales above.

**Please refer to the competition regulations before submitting this form**

For queries relating to age banding in general please contact:

Mark Pinder e-mail: <Mark.Pinder@englandnetball.co.uk>

England Netball, Sports Park, 3 Oakwood Drive, Loughborough,LE11 3QF