



# Player Clearance Form

Player Clearance Forms must be signed prior to being returned to Hockey NSW.

Incomplete forms will not be accepted.

Completed forms are to be sent to [championships@hockeynsw.com.au](mailto:championships@hockeynsw.com.au) two (2) weeks prior to the Championship

By completing this form you have acknowledged understanding and acceptance of the *Field State Championship Operations Manual*, and in particular, **Section 6.2**.

## The Applicant:

- The applicant is responsible for ensuring the form is signed by all relevant Associations (Home and Proposed Association).
- Incomplete forms will not be accepted.

## The HOME and PROPOSED Associations:

- Should either HOME or PROPOSED Associations choose not to accept the application, they must immediately advise the Hockey NSW Competitions and Officiating Manager in writing, clearly stating the grounds of non-acceptance. The applicant must also be advised of this action by the non-consenting Association.
- A separate Player Clearance Form is required for each State Championship the applicant has applied for.

## Hockey NSW

- Hockey NSW will advise relevant parties of a successful nomination by the way of email. Unsuccessful applicants will be advised by their association.

|                    |  |                    |  |
|--------------------|--|--------------------|--|
| STATE CHAMPIONSHIP |  |                    |  |
| HOME ASSOCIATION   |  | ORIGIN ASSOCIATION |  |

### Players Details

|                |  |         |  |       |  |                 |  |
|----------------|--|---------|--|-------|--|-----------------|--|
| NAME           |  | SURNAME |  | DOB   |  | STATE MEMBER ID |  |
| CONTACT NUMBER |  |         |  | EMAIL |  |                 |  |
| SIGNATURE      |  |         |  |       |  |                 |  |

### Home Association Details

|                    |     |               |           |       |  |
|--------------------|-----|---------------|-----------|-------|--|
| NAME               |     | POSITION HELD |           | PHONE |  |
| EMAIL              |     |               |           |       |  |
| CLEARANCE APPROVED | YES | NO            | SIGNATURE |       |  |

### Proposed Association Details

|                    |     |               |           |       |  |
|--------------------|-----|---------------|-----------|-------|--|
| NAME               |     | POSITION HELD |           | PHONE |  |
| EMAIL              |     |               |           |       |  |
| CLEARANCE APPROVED | YES | NO            | SIGNATURE |       |  |

### OFFICE USE ONLY

|               |                       |                   |
|---------------|-----------------------|-------------------|
| APPROVED:     | HOCKEY NSW SIGNATURE: | ADVISED HOME:     |
| NOT APPROVED: |                       | ADVISED PROPOSED: |