



GOULBURN VALLEY LEAGUE
OVERAGE PERMIT APPLICATION
FOOTBALL UNDER 18

Please complete this form and return to the League Operations Manager by post to -

PO Box 1253 Shepparton 3632, or email to jo.spencer@afl.com.au

First name _____ Surname _____

Date of Birth ____ / ____ / ____

Club Representing _____

Other Clubs Played for _____

Height _____ cm Weight _____ kg

Seasons Played _____ Highest Grade Played _____

Club Awards _____

League Awards _____

Representative Squads _____

Player's Statement (Reasons for requiring overage permit)

(If further space is required, please attach another sheet)

Player's Name _____ Signature _____

Coach/Junior Development Officer Statement (Reasons for requiring overage permit)

Coach's Name _____ Signature _____

President's Name _____ Signature _____

PERMIT CONDITIONS.

- A player must be under the age of 19 as of the 1st of January of the current playing season.
- Any player who has been granted an overage permit who is reported and found guilty of an offence, shall have their permit automatically withdrawn. This shall include the acceptance of a set penalty.
- A club may not have more than four overage permit players each year.
- A player having played senior grade football at any club in any season, is not eligible for an overage permit.
- No overage permits will be granted after 30th of June each year.
- The decision on the granting or otherwise of an overage permit by the GVL Board is final.
- A player playing on an overage permit must be highlighted or otherwise marked on the team sheet.
- An overage permit is provisional for four games after which the permit will be re-assessed. A further re-assessment will be conducted on or about 30th of June.
- An overage permit player may not play senior grade football or reserves football. If they do, their permit shall be automatically withdrawn.
- Overage permit players and their club must be fully aware of the relevant bylaws section 5.
- **A copy of a proof of age document must be attached to this application.**
- **A copy of a medical certificate must be attached to this application if request is due to health issues.**

We, the undersigned, understand and agree to the above conditions.

Signed player _____ Signed President/Coach _____

GVL use only

Date application received / /20

Signed conditions received Y/N

Proof of age attached Y/N

Medical certificate attached Y/N or N/A

Player Statement completed Y/N

Coach/JDO Statement completed Y/N

Signed by President Y/N

Provisional approval Y/N Provisional for four games

Date Club Advised / /20__ via _____

Reassess after round _____

Final approval Y/N

Date Club Advised / /20__ via _____