



12 YEAR OLDS IN SECONDARY SCHOOLS NOMINATION FORM 2010

USE THIS FORM ONLY IF YOU ARE IN YEAR 7 Born 1998,1999,2000

THIS FORM IS TO BE USED FOR: BASKETBALL, AFL FOOTBALL, HOCKEY, NETBALL, SOCCER, SOFTBALL AND TENNIS

If applying for more than one sport please use a separate form for each

SPORT: _____

NAME: _____

HOME ADDRESS: _____

POSTCODE: _____

HOME PHONE: _____ **DATE OF BIRTH:** _____

EMAIL: _____

SCHOOL: _____

AGE GROUP: _____ **GENDER:** **MALE / FEMALE**

EXPERIENCE: _____

YEARS PLAYED: _____

PREFERRED PLAYING POSITIONS:

FIRST PREFERENCE	SECOND PREFERENCE	THIRD PREFERENCE

UNDERTAKING:

- I have read the information forwarded with this form and understand my obligations
- My child will be attending the VPSSA Selection trials as advised and will pay trials fee at state trials
- My child is ineligible for any medals where the Selection trial is part of a VPSSA Championship
- If selected in the Final Team, my child will be available for all training sessions and meet all participation costs
- My child will receive notification via home address re date, venue and time of zone trial to attend

PRIVACY STATEMENT: I AGREE FOR MY CHILD'S NAME TO BE PUBLISHED ON RESULTS, PROGRAMS, WEBSITES AND FOR MY CHILD'S LIKENESS TO BE USED FOR PHOTOGAPHIC, VIDEOING OR OTHER MEDIA PURPOSES BY VPSSA/ VSSSA/ SCHOOL SPORT AUSTRALIA

PARENT/GUARDIAN SIGNATURE: _____

I agree that the student is a bona fide student of the school and that the school is affiliated with the VSSSA for the current year.

PRINCIPAL SIGNATURE: _____

**THE NOMINATION FORM MUST BE RETURNED TO THE VPSSA OFFICE AT:
VPSSA, PO BOX 13, COBURG, 3058
NO LATER THAN April 16th
www.vpssa.org.au**

LATE ENTRIES WILL NOT BE CONSIDERED, ELIGIBLE APPLICANTS WILL BE INVITED TO ATTEND A PRIMARY SCHOOL ZONE TRIAL