NZTFI AGE BAND EXCEPTIONAL CASE ASSESSMENT FORM
(September 2022)

APPROVED FORM TO BE SUBMITTED/UPLOADED WITH YOUR REGISTRATION

Player Details (please print clearly)	
Name:	**ID:**
Contingent:	**Province:**
Team:	
Weight:	**Height:**
Date of Birth:	**Requested Competition/Event:**
Contact Phone No:	**E-mail:**

Parent/Legal Guardian (Consent required if player is less than 18 years old)

I confirm that:

a) I am the player or a parent or legal guardian of the above-mentioned player;

b) I consent to my contact details being provided to an Assessing Coach for the purpose of the player undergoing a technical assessment if required (including for arranging a suitable time and day to undertake the assessment);

c) It has been explained to me that the aim of Age Band for Playing Policy is to facilitate inclusion so long as it is safe and for tag football participants with comparable physical development in conjunction with ability and/or experience to play with and against each other;

d) I understand that tag football is a minimal-contact sport, and, like all contact sports, players are exposed to a risk of injury. In addition to understanding these risks, I also agree, to the extent permitted by law, to waive my right to bring any claim for liability against any participant (including players, coaches, volunteers and administrators) and release all participants from any liability that may be incurred in connection with the player's participation in the requested or recommended age grade.

Name: **Signature:** **Date:**

Office use only:

Approved by:
Position: