



PLAYER EXEMPTION REQUEST FORM



This form is to be completed by the player and the club he/she is seeking the request with.

Player Name		FFA No	
Email address		DOB	
Club			
Name of Club Official		Position	
Email Address			
EXEMPTION TYPE (PLEASE TICK APPROPRIATE BOX):			
<input type="checkbox"/>	Dual Registration (I have informed my current club I am seeking this request)	<input type="checkbox"/>	3rd Registration of the Season
<input type="checkbox"/>	Registration outside Registration Period	<input type="checkbox"/>	Other:
Please provide a brief summary of the Exemption Request and attach any supporting documentation:			
ASSOCIATION USE ONLY – ASSOCIATION NAME:			
Does the Association support this application? (provide details below)	Yes	<input type="checkbox"/>	No
Name of Official		Position	
Signature			

I/we certify the information provided in this exemption request to be true and correct

Club Official Signature

Player/Guardian Signature

Football West Office Use Only		
Date Received:	Date Processed:	Approved By:



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