



# PARENTAL PERMISSION TO PLAY SENIORS

application form

Attention: Competition's Director  
Limestone Coast Football Association

I, \_\_\_\_\_ give permission for  
(parent giving permission – please print name)

\_\_\_\_\_ to play Seniors with  
(registered player)

\_\_\_\_\_ for Season 2022  
(name of club)

Signed by Club Official: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signed by Parent: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signed by Competition's Director: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mount Gambier & District  
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