**Application for Junior Dispensation to “Play Up”**

I request dispensation for to play in the age group competition during the 20 season.

We are aware that playing in a higher grade will expose he/she to more body contact by older players and believe he/she has the physical and mental skills to cope with these demands.

If dispensation is approved I/we understand he/she will also be required to play in his/her age grade for which he/she is eligible for be eligible for and we have read, understand and signed the Waiver of Liability form which is part of this application.

Parent/Guardian Signature

Name (Please Print)

Date

Post to:

AIHA PO Box 58048, Botany, Auckland 2163

**Approved/Not Approved** *(circle)*

Signed on behalf of AIHA

Name (Please Print)

Date