



http://www.rugby-league.com/leagues__competitions/yorkshire_junior__youth_league

YJY PLAYER DISPENSATION REQUEST FORM 2018

CLUB MAKING REQUEST.		
AGE GROUP	UNDER	PLAYERS DATE OF BIRTH
DISPENSATION REQUESTED FOR		
NAME OF PLAYER		
REASON FOR DISPENSATION.		
Declaration.		
I/We the parents/guardians of the above named player fully understand the		
consequences should anything happen whilst the above player is participating in training		
or playing within the Yorkshire Junior and Youth League. We understand that should		
there be a serious injury that no blame will be placed against the Club, The Yorkshire		
Junior and Youth League or the Rugby Football League whilst playing under dispensation.		
Parent/Guardia	n	PRINT
Parent/Guardia	n	PRINT
TEAM SIGNATU	RE	PRINT
POSITION		DATE
CLUB OFFICIAL		PRINT
POSITION		DATE
COPIES OF THIS FORM MUST BE SENT TO THE GENERAL SECRETARY.		

GENERAL SECRETARY. secretary@yorkshirejuniors.co.uk

PLEASE NOTE THIS IS ONLY FOR A PLAYING SEASON PERIOD AND MUST BE RENEWED ANNUALLY.

Please attach any paperwork supporting the players request, anyone found guilty of falsifying information regards a player seeking dispensation to play outside their official playing age group will be severely dealt with by the League Management.