

**SPECIAL CONSIDERATION APPLICATION**  
**FOR PSSA TEAMS**

I would like my child/ward \_\_\_\_\_ to be considered for the  
\_\_\_\_\_ team. The reason my child was unable to attend both trials was:  
\_\_\_\_\_.

Doctor's certificate attached.

**External Sport-Specific Experience and Positions**

Current/Recent Club Team & Grade: \_\_\_\_\_

Preferred position/s: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Current/Recent representative teams (e.g. squad):  
\_\_\_\_\_

Current/Recent position/s played in the representative team:

1. \_\_\_\_\_ 2. \_\_\_\_\_

Other teams or past experience: \_\_\_\_\_

Parent/Carer Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_