

Official Club Letterhead ←



01/01/2018

Date

Capital Football
2/3 Phipps Close
Deakin, 2600

Capital Football
Mailing Address

Dear Administration Assistant,

Who to address it to

Type of dispensation

I wish to apply for dispensation for the following underage players to enter my U16 Male Capital Football – CF United:

Kanga Cup Team

Player name: John Citizen
DOB: 02/22/2006
FFA Number: 11111111

Player details

John is in the same year of school as the other players, and would prefer to play with his friends at his level rather than the above age group.

Reason for applying for dispensation

Please find attached a medical certificate, a letter from his parents, and a letter from his coach confirming his suitability for this age group.

Proof of physical and psychological capability in higher age group

I firmly believe that no unfair advantage will be given by granting this request.

Confirmation no unfair advantage will be attained by granting this request.
Can include playing history/level as proof

Please do not hesitate to contact me with any further questions.

Sincerely,

Jane Doe

Must be signed by Club Official

President of Club

Phone: 0400 000 000
Email: jane.doe@email.com

Contact Details



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