



ADVICE CONFIRMATION FORM DISPENSATION REQUEST TO PLAY DOWN AN AGE

PLAYER DETAILS

Player Name	
myNetball No.	
Club	
Date of Birth	

DARWIN NETBALL ASSOCIATION MANAGEMENT TEAM CONFIRMATION OF DECISION

Request for Dispensation is	APPROVED	NOT APPROVED
Dispensation is valid for	Season 2016	
Approving DNA Officer		
Approving DNA Officer Title		
Signature		
Date	/ / 2016	