



## 2013 REPRESENTATIVE QUALIFYING EXEMPTION FORM

I \_\_\_\_\_ (player's name) from  
\_\_\_\_\_ (Current or most recent  
Association) wish to apply for an exemption for the representative season  
qualifying on the grounds of

---

---

---

---

---

(note if you are applying on medical grounds you must submit a doctor's certificate)

Please note that if approved, you will need to fill out a BBNZ transfer form and  
pay \$25 to BBNZ.

Age group \_\_\_\_\_

Boys/ Girls \_\_\_\_\_

Parent/ Guardian name \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_