EASTERN FOOTBALL LEAGUE

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **COLTS DEVELOPMENT PLAYER PERMIT** | | | | | | | | | | |
| **CLUB** |  | | | **SEASON FOR APPROVAL** | | | | |  | |
| **PLAYER NAME** |  | | | | **DOB** | |  | | | |
| **HEIGHT** | **cm** | | | **WEIGHT** | | | **kg** | | | |
| FOOTBALL HISTORY – LAST 3 SEASONS PLAYED | | | | | | | | | | |
| SEASON | | CLUB | | # of GAMES PLAYED | | ACHIEVMENTS *(B & F Results etc.)* | | | | |
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|  | |  | |  | |  | | | | |
| SIGNED | | | | | | | | | | |
| **Player Name** |  | | Signature |  | | | | Date | |  |
| **Club Official** |  | | Signature |  | | | | Date | |  |
| **Position Held** |  | | | | | | | | | |
| **OFFICE USE ONLY** | | | | | | | | | | |
| **EFL Approval** |  | | |  | | | | | | |
| *(name)* | | | | *(signature)* | | | | | | |
|  | | | | **DATE** | |  | | | | |

Permit must be submitted to EFL General Manager – Football Operations minimum 48hrs prior to the player’s first game.

The player must not play until permission is granted.

Permit to be submitted to: [tswainston@efl.org.au](mailto:tswainston@efl.org.au) or by facsimile 9761 1315.