**NSW Country Exceptional Circumstances Form**

**To: the Country Liaison Standing Committee**

This request is to be used where a player is submitting a request to be considered for selection in a NSW Country team where they are unable to play in the NSW Country Championships.

Age Division: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Player name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Association: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registration Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_\_/\_\_\_\_\_

I request that the above player be considered for NSW Country selection on the basis that he/she is unavailable to participate in the NSW Country Championships due to the following exceptional circumstances:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Requested by: \_ Signed \_\_\_\_

Please Print

Association Position:

Please Print

Date / /

Please email to countryadmin@baseballnsw.com.au as soon as possible prior to the Championships with any other supporting evidence (for example: medical reports/certificates) .