



Ascot Park Primary School

Specialist Sports Program – Application Form

Application forms are accepted all year and positions are reviewed and offered at the end of each term.

Student Name: _____ D.O.B: _____ Sex: _____
(DD/MM/YYYY) Male/Female

Parent/Caregiver Name: _____

Address: _____

Suburb: _____ Postcode: _____

Email: _____ Phone: _____

Which sport are you applying for?(**circle**) Soccer Netball Gymnastics

Current or Previous Club
(if applicable): _____

Background and Experience in Soccer/Netball/Gymnastics: _____

Current School: _____ Year Level : _____

How did you hear about the program? Word of Mouth Facebook Web search
 Flyer Other Club
(_____) Radio/Newspaper

The specialist sports coordinator will be in touch to organise a practical trial if your child is not attending a set trial date.

I/We understand that this application will be assessed by the specialist sports coordinator and specialist coaching staff.

Parent/Caregiver _____ Signature: _____

Phone: _____ Date: ___/___/___

Please fill out above application form and return to:

Specialist Sports Coordinator
Ascot Park Primary School
1-37 Pildappa Ave, Park Holme 5034
Fax: (08) 8277 9007 Ph: (08) 2876 3055
Email: dl.0340.sport@schools.sa.edu.au