

Marching New Zealand Exception Application Form

Applicants must complete this Exception Request and forward it to their Association Secretary for consideration in the first instance. Associations will then forward on to the MNZ EO, at ceo@marching.co.nz for MNZ approval.

NOTE:

All Applications must be received prior to the member's registration for the season.

NATURE OF EXCEPTION REQUESTED

(Circle) Age Exception Disability / capability consideration Other (please specify) _____

Reason for Applying for Exception:

Example – "to march in Under 18s as we have no Under 13s in our Association" etc.

Other reasons to support the above request:

Example – include additional information e.g., "learning difficulties or medical reasons" NB Attach documents supporting this information from professionals, medical practitioner etc. and attach to this form

DETAILS OF MEMBER REQUESTING THIS EXCEPTION

Full Name:	Date of Birth: / /
Contact Phone #	School Year:

Team Name that this member wishes to register with:

Grade: (Circle) Under 13 Under 18 Senior Masters Other

Role Applying For: (Circle) Marcher Coach Chaperon Committee Member

Association:

DETAILS REGARDING THE REGISTERED TEAM FOR THIS SEASON

Number of members in the team this season

Example - 9 with this member

Other details relevant to the team:

Example – provide details of other team members, their names, experience and ages so that it can be established the overall benefit to the team and consider other options and alternatives available

MEMBER'S DECLARATION AND SIGNATURE

Declaration: In signing this I declare that all details are, to my knowledge, true and correct and that I agree to this exemption request

*Signed by the Applicant: <small>NB If under 18 years of age a Parent/Guardian to sign</small>	Signature:
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TEAM OFFICIAL ONLY - AWARENESS & ACKNOWLEDGEMENT

Provide reasoning as to why the exception supports the member's welfare, development, and safe participation. Include confirmation that the exception does not compromise fairness within the grade.

Example: "The member's inclusion would allow continued participation without advantage; physical ability and cognitive understanding are consistent with the grade's intent."

*Signed by the Team Official: <small>The Team is aware of this Exception Request and fully supports the application</small>	Signature:
	Print Name:
	Position Held:

ASSOCIATION USE ONLY

Date Received: / /		Approved	YES / NO
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Relevant information supporting the Associations Decision:

Signature	Position Held:
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MNZ USE ONLY

Date Received: / /		Approved	YES / NO
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Other relevant information:

Signature	Position Held:
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