



SETTLERS RUN JUNIOR GOLF PROGRAM **JUNIOR DEVELOPMENT PROGRAM**

SCHOLARSHIP PROGRAM **APPLICATION FORM**

Please return completed forms via email or in person to:

golfops@settlersrungcc.com.au

Settlers Run Golf Academy,
1 Settlers Run, Botanic Ridge Vic, 3977

PH: 03 9785 6072 ext. 1

The Academy has an inclusive criterion for Golf based on ability, attributes and specific characteristics and welcomes members of the community regardless of cultural background, mobility, gender or religious beliefs.



Golf Ops Only

Date Form Received: _____



SCHOLARSHIP PROGRAM Athlete Application Form

ATHLETE DETAILS

Given Name:		Surname:	
Gender: M / F		Date of Birth:	
Residential Address:			
Town:		State:	Postcode:
Postal Address:			
Town:		State:	Postcode:
Home Phone:		Fax:	
Mobile:		Email:	

PARENT/GUARDIAN DETAILS

Mother's/Guardian's Name:			
Postal Address:			
Town:		State:	Postcode:
Home Phone:		Work Phone:	
Mobile:		Email:	
Father's /Guardian's Name:			
Postal Address:			
Town:		State:	Postcode:
Home Phone:		Work Phone:	
Mobile:		Email:	

Education/OCCUPATION DETAILS

<i>Under the terms and conditions of the offer for admission, you must be either be:</i> <ul style="list-style-type: none">• Attending primary, secondary, or tertiary education• Employed or actively seeking employment	
School/Employer:	Year Level (if applicable):



SPORTING PROFILE

Details of Current Club, State or National Coach

Name: _____

Club: _____

Golf Link Number:		Current Handicap:	
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Phone: _____ Email: _____

Past Performance(s)

Please outline your achievement at the following levels: (indicate highest or latest team selection)

Club:	
Region:	
State:	

Sporting Goals

What are your aspirations/objectives within the sport of golf over the short term (1 year)?

What are your aspirations/objectives within the sport of golf over the medium to long term period? (2 -5 years)

Why do you think being involved in the Settlers Run Golf Academy Program will help you?



Athlete Medical Form

Athlete's Name:	
Doctor's Name:	
Doctor's Clinic:	Doctor's Phone:
Private Health Insurance? Yes / No	Fund Name:
Medicare Number:	
Do you have ambulance cover? Yes / No	

Does your child suffer from any of the following medical conditions?

- Diabetes Yes / No
- Asthma Yes / No (if yes, please complete Asthma Action Plan form)
- Epilepsy Yes / No
- Bronchitis Yes / No
- Heart Condition Yes / No
- Heart Murmur Yes / No

If yes, please detail management:

Does your child suffer from any allergies? Y / N
(Please list any allergies & detail management)

Does your child have any physical (e.g. muscular/joint) problems or limitations? Y / N
If yes, please explain.

Are there any other conditions (e.g. infectious diseases) that the Golf Academy should be aware of? Y / N
If yes, please explain.

Does your child have any special dietary requirements? Y / N
If yes, please explain.

Does your child take any long-term medication? Y / N
If yes, please specify.

I hereby give permission for the First Aid Officer to administer first aid and for an Ambulance to be called for my child in case of an emergency.

Print Name: _____ Parent Signature: _____ Date: _____



Use of Personal Information & Media Releases

Promotional & media releases are a key tool utilised by the SR Golf Academy to promote our athletes' achievements in addition to recognising our sponsors and providing them with promotional value.

Once an athlete has achieved a milestone the following process is to take place:

1. Contact the Academy and provide details of the accomplishment. (Complete the clubs media release information form.)
2. The Academy will produce a release and circulate to our database as well as forwarding to the relevant sponsor.
3. The athlete should also nominate their preferred time to do interviews of which the Academy will coordinate.
4. Where possible the Academy will ensure there is someone in attendance to assist the athlete with wording/nerves etc.

Please Note: Contact with the Academy should be relatively soon after an achievement so the news can be as current as possible.

Internet (Facebook) Guidelines

1. Exercise courtesy, especially regarding the tone of your posts. Treat your Settlers Run community members with respect just as you would like to be treated.
2. Profanity and abusive language are not permitted.
3. Settlers Run will be monitoring your posts for their veracity or usefulness. Each of you must also be responsible for how you interpret the information, you read if you choose to read it
4. It is recommended you never post your address or phone number.
5. If your post does get deleted and you have questions, please feel free to email Settlers Run
6. Your posts should always adhere to these guidelines.
7. If for any reason you harass other members or are unable to abide by these guidelines, you will be removed from the group effective immediately.

Athlete Code of Behaviour

By accepting a program position with the Settlers Run Golf Academy you agree to comply with all the conditions listed below and fully understand that failure to do so may result in expulsion from the Academy.

- Work towards the attainment of your full potential in sport and studies and/or employment
- Make every effort to attend all training sessions as specified by the program personnel.
- Notify the Director of Golf in advance of your inability to attend any Academy session with a reason for non-attendance.
- Comply with the training requirements as instructed by the coaching staff.
- Accept and respond in a positive manner to their requests and constructive criticism.
- Maintain personal habits of health conducive to sporting excellence.
- At all times behave in an appropriate manner – never argue with an official, coach or Academy staff.
- Agree to not use any form of performance enhancing drugs that are banned by the Australian Sports Anti-Doping Authority
- Agree to participate in random drug testing conducted by recognised authorities.
- Agree to attend Academy promotional functions/media releases as requested.
- Wear the appropriate Academy uniform to Academy sessions.



Please Note: By signing and returning this form you have agreed and acknowledged the following:

- a) The Academy will not be liable for any injury or illness associated with the athlete. All athletes participate in Academy programs at their own risk.
- b) That you are aware of the nature of any normal hazard associated with transportation supplied by the Academy programs to attend tournaments, trainings & training camps.
- c) The Academy will not be liable for any loss or damage arising out of the normal course of camps/ activities/ competitions or courses attended by the athlete.
- d) That your son/daughter is representing the Academy and thus expected to behave according to the Athlete Code of Behaviour.
- e) That any breaches of (d) above will result in the athlete being sent home, with costs associated with this action being the responsibility of the parent/guardian, and the athlete status within the program will be reviewed.

ATHLETE DECLARATION

Having read and understood the above athlete conditions, I accept these conditions as stated.

- I certify that the information supplied is correct to the best of my knowledge.
- I understand that the Academy reserves the right to reverse any decision regarding my participation, made on the basis of false information supplied or my failure to adhere to the conditions.

Athlete Signature: _____ **Date:** _____

PARENT DECLARATION

Having read and understood the above athlete conditions, as legal guardian for the athlete, do accept the conditions as stated.

- I hereby authorise the Academy to produce media releases and to utilise the athlete profiles and photographs of the Academy to promote the organisation and any accomplishments that my son/daughter may have achieved. Including utilizing social media (Facebook and Instagram), as well as the Academy website.
- I hereby give permission for my son/daughter to participate in tournaments, training camps and clinics arranged as part of the program.

Parent/Guardian Signature: _____ **Date:** _____

COACH DECLARATION

- I have read this application and hereby acknowledge that the information relating to sporting achievements is to the best of my knowledge true and correct.
- I support the athlete’s application and endeavour to work with Settlers Run Golf Academy to assist the athlete in pursuing their sporting pursuits.

Coaches Signature: _____ **Date:** _____