**YJYARL PLAYER DISPENSATION REQUEST FORM 2025**

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| Club making request:- | | |
| Player RFL ID No. 000 | | True Age Group |
| Name of Player | | Age Group Requested |
| Reason(s) for request. Please put as much information as you can. You must send supporting evidence for the request. Dispensations are based on the player’s needs alone, and the risk to them, their team and the opposition will be assessed.  We confirm that we have explained to the player and their parents/guardians that there is no guarantee the dispensation will be granted, and that if it is granted, they will be contacted by the League to confirm they understand the implications of playing outside of the standard 2-year banding. | | |
| Team contact | Email address | |
| Club official | Email address | |
| Position | DATE | |
| THIS FORM MUST BE SENT TO THE GENERAL SECRETARY. [secretary@yjyarl.co.uk](mailto:secretary@yjyarl.co.uk) | | |
| PLEASE NOTE THIS IS ONLY FOR A PLAYING SEASON PERIOD AND MUST BE RENEWED ANNUALLY.  Anyone found guilty of falsifying information regards a player seeking dispensation to play outside their official playing age group will be severely dealt with by the League Management. | | |