



**NETBALL  
NORTHERN**

## ELITE PERFORMANCE PROGRAMME

### UPDATED INFORMATION FORM

This form is for existing 2017-2018 NZEPP members. Please complete and email to [nzepp@netballnorthern.co.nz](mailto:nzepp@netballnorthern.co.nz) by **September 1, 2018**, if you wish to be considered for re-selection to the NZEPP for 2018-2019.

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Are you a:                      **Coach**                      **Athlete**                      **Manager**                      **Umpire (highlight one)**

Do you wish to be considered for re-selection to the NZEPP ?                      **YES**                      **NO (highlight one)**

**Athletes please complete the below**

**Employment:**

**Employer:**

**Full Time / Part Time/ Shift Work / Weekend Work**

**Education:**

**University / Provider:**

**Course:**

**Location:**

**Full Time / Part Time**

**Transport:**

**Do you have a car or access to a car: Yes / No?**

**Licence - Full / Restricted / Learners / None**

**If no licence or car how will you get to trainings and games**

**Living Arrangements**

**Address**

**Do you Live at Home / Flat / Board**

**Emergency contact details:**

**Name:**

**Relationship:**

**Contact Details:**

Get updates on the NZEPP here: <http://www.mynetball.co.nz/zones/northern/high-performance.html>

Do you have any Allergies or Dietary Requirements?
Do you have any injuries or illness which inhibit your ability to train and play sport? If yes, please describe your situation.
Are you still at school? If yes, what year are you?
Club /School Team 2018: Club School Coach 2018:

***By submitting this form, you agree to the information set out above being held and used by Netball Northern Zone and other [athlete service providers] approved by Netball Northern Zone, from time to time. You are entitled to request access to and correction of this information.***

**Signature:**

**Date:**