



## Golf Australia Rookie Program Application Form

### **Section 1 Personal details**

Given names \_\_\_\_\_ Family name \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Female \_\_\_\_\_ Male \_\_\_\_\_

Current address \_\_\_\_\_

\_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Mobile \_\_\_\_\_ Email \_\_\_\_\_

Australian citizen \_\_\_\_\_ Passport number \_\_\_\_\_

Date turned Professional \_\_\_\_\_

Tour Status 2017 (if unknown 2016 status) \_\_\_\_\_

Current sponsors \_\_\_\_\_

### **Section 2 Education and employment**

Secondary education level \_\_\_\_\_

Tertiary education level \_\_\_\_\_ Year/Stage \_\_\_\_\_

### **Section 3 Authorities**

#### **A Injury/illness disclosure**

List all the illnesses and injuries that have affected your training in the past 12 months and the name and address of any medical practitioner consulted in relation to your condition. Older injuries with ongoing effects are also to be declared.

| Illness/injury | Medical practitioner | Address and telephone |
|----------------|----------------------|-----------------------|
| 1              |                      |                       |
| 2              |                      |                       |
| 3              |                      |                       |

**B Medical releases**

I hereby authorise any hospital, physician or other person who has attended or examined me to provide to Golf Australia, or its representative, any and all information with respect to any illness or injury, medical history, consultation, prescriptions or treatment and copies of all hospital or medical records. A copy of this authorisation shall be considered as effective and valid as the original.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

**Section 4 Service team**

List your current service team or people you have previously worked with and for how long you have been associated with them.

| <b>Service</b>                     | <b>Name</b> | <b>Duration</b> | <b>Email &amp; Telephone</b> |
|------------------------------------|-------------|-----------------|------------------------------|
| <b>Coach</b>                       |             |                 |                              |
| <b>Physio</b>                      |             |                 |                              |
| <b>Strength &amp; Conditioning</b> |             |                 |                              |
| <b>Mental</b>                      |             |                 |                              |
| <b>Biomechanics</b>                |             |                 |                              |
| <b>Nutrition</b>                   |             |                 |                              |
| <b>Manager</b>                     |             |                 |                              |
| <b>Accountant/Financial</b>        |             |                 |                              |
| <b>Caddie</b>                      |             |                 |                              |
| <b>Other</b>                       |             |                 |                              |

## **Section 5 Business Plan**

Applicants must submit a business plan that contains the following information:

- Planned Tours or qualifying school pathway
- Estimated annual cost for: service provision, travel, coaching, visa, daily training environment, entry fees, caddies, practice facility access, accountant, equipment, etc.
- Potential funding/sponsorship opportunities outside of the Rookie Scholarship - (company, family, friends)

## **Section 6 Golf Australia Rookie Requirements**

Potential GA Rookie applicants must understand that GA is investing a great deal of time and resources into the future of Australian golf. GA must have a full understanding of an athlete's developmental processes if they are to fund the future development of the athlete. As part of being a member of the squad it's important you understand some of the basic requirements all members must satisfy during their time in the program annually. Some of these requirements are listed but not limited to the below:

- ✓ Physio Screening/reviews/check-ups
- ✓ 3D screening
- ✓ Medical screening
- ✓ Tournament schedule placed in "Shots to Hole" program
- ✓ Service provider team meetings with GA
- ✓ S & C program review/check-ups
- ✓ Home coach present at events
- ✓ Sam Putt Lab session
- ✓ All tournament rounds entered into the "Shots to Hole" stats program
- ✓ Result and process goals/priorities outlined
- ✓ Placement of the GA logo on all tournament apparel and golf bag

### **Declaration and signature**

I wish to be considered for a Golf Australia Rookie Scholarship in 2017 and declare that all information submitted in this application is correct and complete. I understand that Golf Australia reserves the right to vary or reverse any decision regarding admission made on the basis of incorrect or incomplete information.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

Please return this completed form to:

Golf Australia Rookie Applications  
Attn: Matt Cutler  
Level 2, 111 Coventry Street  
South Melbourne, VIC, 3205

or

[mattc@golf.org.au](mailto:mattc@golf.org.au)

**Applications close January 4<sup>th</sup>, 2017**