

**APPLICATION FORM – Tier 1 & 2**  
**Golf SA High Performance Program 2018**



**Applications close Sunday 4<sup>th</sup> March at 5:00pm**

Please email the completed application form to Alicia Smith (Golf SA High Performance Coordinator): [admin@golfsa.com.au](mailto:admin@golfsa.com.au) Should you have any questions, please call 8267 1353

.....  
**Player Details**

Full Name:	
Date of Birth:        /        /	
Address:	
	Postcode:
Player Phone:	Guardian Phone:
Player Email:	Guardian Email (if under 18 yrs):
Golf Link Number:	Current GA Handicap:
National Ranking:	National Junior Ranking:

**1. What personal qualities will you bring to the program?**


**2. What professional development opportunities would you like to get out of the program?**


**3. Please provide details of your current coach:**

Name:	
Phone:	Email:
How often do you typically see them?	

**4. What is the highest representation level you have achieved? (*State Teams, School, Club, etc.*)**


**5. What are your future plans and goals in golf over the next 12 months to 3 years?**


**6. Are you currently seeking services from the following providers? Please provide details.**

<b>Physio</b>
Name:
Phone:
Email:
<b>Strength &amp; Conditioning</b>
Name:
Phone:
Email:
<b>Psychologist</b>
Name:
Phone:
Email:

**7. Are you involved in a structured golf program at your Club / School / District?**


**8. Do you regularly use a statistics program? Please provide details.**


**9. What are you other commitments? (School, University, Job, other sports, etc.)**


**10. Approximately how many events did you compete in 2017?**

Locally:	Interstate:	Overseas:
----------	-------------	-----------

**11. Please provide your best event results over the past 12 months.**

	Event	Scores	Position in Field
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

### Application Declaration

- If chosen I will give 100% commitment to the program and attend all training sessions.
- I will give respect to all service providers, coaches, staff and squad members.
- I will have a professional attitude to training.
- I will work as part of a team at all times.
- I will adhere to the Golf SA Code of Conduct and other relevant policies.
- I will respond to all administration/emails/calls/messages as soon as possible.
- I will enter all events and trainings into my personal calendar.
- I understand that noncompliance/nonattendance may result in removal from the program.
- Nonattendance must be approved by a relevant coach / service provider.

**I declare the information in this application is true and correct to the best of my knowledge and I understand the terms of the application.**

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Guardian Name: \_\_\_\_\_ Guardian Signature: \_\_\_\_\_

*(If applicant is under 18 years of age)*

### **Cost of 2018 HP Elite Development Squad Program (Tier 1 & 2): \$525.00**

Method of Payment:      Cheque      Visa      MasterCard

Card Number \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ expiry date \_\_\_\_ / \_\_\_\_ CVN \_\_\_\_\_

Card Name \_\_\_\_\_

Signature \_\_\_\_\_

Please supply your US polo / t-shirt size: US \_\_\_\_\_

**\*\*Please Note: payment will be processed after successful applicants have been selected and notified\*\***