

International Permit Application



Athlete Information

Athlete Name: _____

Athlete Club: _____

Athlete Registration Number: _____

Athlete Contact Number: _____

Athlete email address: _____

Competition Information

Date of departure: _____

Date of return: _____

Signed: _____

Date: _____

Athletes who **DID NOT** qualify for the “Open” National Championships this year should complete and forward this form to their relevant **Member Association**.

Member Associations	
Capital Athletics	Athletics Tasmania
Athletics New South Wales	Athletics Victoria
Queensland Athletics	Athletics West
Athletics South Australia	