

STATE AND NATIONAL SERVICE SPORT PARTICIPATION REQUEST

This form must be completed prior to participation in Combined/National Service sport. The member must ensure that a completed copy of this form is placed on their personal file and a copy given to the Physical Training (PT) staff for filing.

Member's details: *To be completed by requesting member.*

Surname: Initials: Rank/Rate:

PMKeys No: Unit: Contact No:

Sport/activity to be played:

Dates and location of events:

History of participation in nominated sport:.....

Approval check off list: To be signed by authorised personnel.

Regulator recommendation: RECOMMENDED/NOT RECOMMENDED

Name: (print) Sign: Date:

Head of Division approval: APPROVED/NOT APPROVED

Name: (print) Sign: Date:

Medical recommendation: RECOMMENDED/NOT RECOMMENDED

Medical readiness: Ready/Not Ready

Medical restrictions:

Name: (print) Sign: Date:

Note: *To be signed by an Medical Officer or Medical Senior Sailor.*

Physical trainer (PT) recommendation: RECOMMENDED/NOT RECOMMENDED

Annual PFT readiness: Ready/Not Ready

Authority for participation: (signal/administration instruction/email): Yes/No

Reference:

Has member been given all event details? Yes/No

Is member aware of responsibilities of representing the Navy?

(in accordance with this instruction and DI(G) PERS 14-2? Yes/No

Has a completed copy of this form been placed on gym file? Yes/No

Has a Form PY 82—*Travel Requisition/Order* been completed? Yes/No

PT Name: (print) Sign: Date:

Member to sign that all information above is true and correct.

Name: (print) Sign: Date:

Commanding Officer approval: APPROVED/NOT APPROVED

Name: (print) Sign: Date: