## APPLICATION FOR CHANGE OF FIRST CLAIM CLUB



On completion this form should be sent to the			
Welsh Athletics Ltd Rules and Eligibility Facilitator: C/o Welsh Athletics Ltd, Cardiff International Sports Stadium, Leckwith Road, Cardiff CF11 8AZ.			
Please familiarise yourself with UKA Rules for Competition No 4 & 5.			
Surname:	First Name:		
Gender:	Maiden Name:		
Date of Birth:	Place of Birth:		
Address:			
Tel No:	Registration Number:		
Events in which you compete			
Previous First Claim Club:	Region:		
Date of Election:	Date of Registration:		
Any other club (s)			
Club for which you wish to be first claim :			
Date of election to this club:			
(NB application to a new club should be made within 28 days of resignation from previous club) Applications will only be considered from fully paid up registered athletes. Please note that if you are a member of more than one open club, you must resign from all the clubs if you wish to change your first claim club, unless you are changing to your former second claim club.			
REASON FOR CHANGE OF FIRST CLAIM CLUB. Please complete the appropriate section below if you are claiming exemption from the operation of the first claim rules, using a separate sheet of paper if necessary.			
BOX A – CHANGE OF ADDRESS  If your change of club was because of a change in your normal place of residence:			
Previous Address	ge in your normal place of residence.		

**Date of moving** 

## **BOX B – APPLICATION ON OTHER GROUNDS OF HARDSHIP**

**Signature of Regional Secretary:** 

PLEASE ENSURE THAT YOU HAVE ENCLOSED YOUR FEE OF £10.00 (if this is not included it will delay your claim application) An application will only be considered if it is made personally by the athlete named and completed in all relevant sections. The boxes below must be completed by the club from which the athlete has resigned and signed by 2 officers of that club. A *fee of £10 must* accompany this application for U17/U20/Sen athletes. Cheques should be made payable to the 'Welsh Athletics'. If the claim for exemption is based on agreement of the clubs concerned, box I must also be completed by the club you are leaving. Please note that U13 & U15s must complete the form as usual & no payment is due when requesting to change clubs under rule 4(9).

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was a fully paid up member a This is to certify that the resig fully paid up member at that	t that time. gnation of the athlete names of time.		epted from (date) and that he / she epted from <b>Feb 2019</b> and that he was a	
Box A overleaf has been com	-			
	ation. (A letter may be sent ting reasons for so doing. This		ligibility Committee if supporting or ly but should not	
*Delete as appropriate				
Signature of Officer:		Position:		
Signature of Officer:		Position:		
Name of Club:		Date:		
We (insert name of club) agree that the change of club is in the best interests of th athlete concerned.				
We	(insert name of clu	o) agree that the char	nge of club is in the best interests of th	
We	(insert name of clu	o) agree that the char Position:	nge of club is in the best interests of th	
Weathlete concerned.	(insert name of clu	-	nge of club is in the best interests of th	
Weathlete concerned. Signature of Officer:	(insert name of clul	Position:	nge of club is in the best interests of th	
Weathlete concerned. Signature of Officer: Signature of Officer:		Position: Position:	nge of club is in the best interests of th	
Weathlete concerned. Signature of Officer: Signature of Officer: Date:		Position: Position:	nge of club is in the best interests of th	
We	r exemption can be claimed o	Position: Position:		
Weathlete concerned. Signature of Officer: Signature of Officer: Date: NB This particular ground for Signature of applicant:	r exemption can be claimed o	Position: Position:		
Weathlete concerned. Signature of Officer: Signature of Officer: Date:  NB This particular ground for Signature of applicant:  FOR USE BY REGIONAL	r exemption can be claimed o	Position: Position: n one occasion only		
Weathlete concerned. Signature of Officer: Signature of Officer: Date: NB This particular ground for Signature of applicant: FOR USE BY REGIONAL Date Received:	r exemption can be claimed o	Position: Position: n one occasion only		