

Dear Players,



This is an invitation to the **2014 Hockey NSW U13 Development Clinic**. This clinic is open to all U13 players registered in NSW.

CLINIC DETAILS			
<b>GIRLS DATES</b>	Saturday 22 <sup>nd</sup> & Sunday 23 <sup>rd</sup> March 2014	<b>BOYS DATES</b>	Saturday 29 <sup>th</sup> & Sunday 30 <sup>th</sup> March 2014
<b>VENUES</b>	TBC <i>There will be a number of venues. Athletes will be automatically registered at the venue that is closest to your home address</i>		
<b>CLINIC TIMES</b>	Saturday: 8am – 4pm, Sunday: 8am – 4pm <i>Please arrive half an hour prior to the start time as each day will commence at 8am</i>		
<b>COST</b>	\$350.00 per athlete		

### CLINIC OUTLINE

The development clinic is designed for **ALL Players born in 2001 and 2002**, registered with Hockey NSW. These clinics will be held in the last two weeks of March and are an opportunity for any U13 player to gain skill development and game education as well as an opportunity for talent identification prior to the U13 State Championships in July. In 2014, Hockey NSW will be introducing acceptable fitness (beep) test standards to the Hockey NSW Selection Policy. There will be a practice beep test conducted at the U13 Development Clinic, which will allow athletes the chance to compare their current level of fitness with that of the acceptable standard before the squad is named after the U13 State Championships.

### CHANGES IN SELECTION CRITERIA FOR 2014 U13 TRIAL

At the conclusion of the 2014 Catalyst Money U13 Field State Championships a Squad of forty five (45) athletes will be announced to attend a final trial. In light of Hockey Australia introducing minimum fitness standards for the national program, Hockey NSW has decided to introduce 'acceptable' standards. This will ensure that all athletes are at a standard that will allow them to perform at their best for the entirety of the National Championships and minimise risk of injury due to overload. At the U13 age group, this is also an opportunity to set a good platform for future standards. The standards for U13 are as follows:

- Boys: Acceptable Level 8.5; Desired Levels 9-11 (field players only)
- Girls: Acceptable Level 8; Desired Levels 8.5-10.5 (field players only)

For an athlete who is sick/injured the exemption process outlined in the Hockey NSW Selection Policy will be applied, (please note if an athlete is e sick/injured and cannot complete the beep test, you will need to submit an exemption as you will not be able to then trial). If an athlete does not reach the standards, they can be named in the team but must reach the acceptable standards no later than one month out from the Australian National Championship. If standards are still not achieved, the athlete will be replaced.

### PAYMENT

There are two payment options for the clinic:

1. Pay In Full – Due 6 December 2013
2. Two Instalments: 50% Due 6 December 2013 - 50% Due 16 January 2014

Kind Regards,

**RACHEL MILLER**

Player Development Coordinator

Please return to Hockey NSW to Rachel Miller via [rachel.m@hockeynsw.com.au](mailto:rachel.m@hockeynsw.com.au) or fax to 02 9746 2588 by 5pm **Friday 6<sup>th</sup> December 2013**

## REGISTRATION FORM

Please submit, no later than **5PM FRIDAY 6 DECEMBER 2013**. Late nominations will not be accepted.

<b>Players Name</b>			
<b>Clinic</b>	<input type="checkbox"/> U13 Girls	<input type="checkbox"/> U13 Boys	
<b>Address</b>			
<b>Phone Number (H)</b>		<b>Mobile</b>	
<b>Email</b>			

### Uniform – All players will be supplied with Development Clinic Singlet

Boys <i>Please tick</i>	<input type="checkbox"/> XS	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> L	<input type="checkbox"/> XL
Girls <i>Please tick</i>	<input type="checkbox"/> 6	<input type="checkbox"/> 8	<input type="checkbox"/> 10	<input type="checkbox"/> 12	<input type="checkbox"/> 14

### PAYMENT OPTIONS (please tick your payment option)

<input type="checkbox"/> <b>Credit Card Payment:</b>	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
Card Number:		
Name on Card:		
Expiry Date:	3 Digit Security Code:	Amount to Debit: <b>\$350</b>
<input type="checkbox"/> <b>Direct Deposit Payment:</b>	(Please reference participants name, surname first)	
Bank:	St George Bank	
BSB	112-879	
Account No:	492 524 230	
<input type="checkbox"/> <b>Cheque:</b>	Please make cheques payable to "Hockey NSW" and please include name of participant on back of cheque.	
Parent/ Guardian:		Date:

***Late withdrawals must be received in writing by the Hockey NSW office no later than 7 days prior to Development Clinic***

***Withdrawals received within 7 days of the Development Clinic will NOT be REFUNDED by Hockey NSW.***