

Application for AFL Specialist Program 2027

Student Name	
Year of Schooling	
Primary School	
Parent/Carer full name	
Contact number	
Parent email	
Briefly explain why you would like to be part of the Ellenbrook Secondary College AFL Program	
Describe your experiences and strengths with respect to AFL.	
Do you play club football outside of school?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If YES, which club do you play for?	
How many years of experience do you have playing AFL?	

THIS FORM MUST BE COMPLETED ALONG WITH ANY ATTACHED DOCUMENTS

Expressions of interest will not be considered without attendance at an after-school AFL Clinic, please contact Ellenbrook Secondary College for clinic dates.