

#### SOUTH WEST SYDNEY ACADEMY OF SPORT

# 2014-2015 SWSAS GOLF SCHOLARSHIP PROGRAM NOMINATION



The South West Sydney Academy of Sport is accepting nominations from athletes interested in being considered for selection into the 2014-2015 Academy Golf program.

The program will consist of up to 12 athletes and the final selection into the program will be based upon:

- Age athletes born between 1998 and 2002 (inclusive) Turning 13-17 in 2015.
- Previous performance Handicap Boys <10, Girls <15.
- An interview may be held following the submission of nomination forms.
- Athletes must reside, attend school or be registered with a golf club within the Academy area. The Academy area includes: Campbelltown, Camden, Liverpool and Wollondilly Council areas.

The Academy will apply a strict criterion to selection process. This selection criterion comprises sport specific requirements developed in collaboration with the relevant State Sporting Organisation.

Athletes submitting a nomination for inclusion in the Academy Golf scholarship program are required to acknowledge that the acceptance for their nomination will be at the sole discretion of the Academy.

Scholarships are not in the form of a monetary sum, but rather enable athletes to participate in the Academy program that includes training workshops, camps and competition opportunities. These workshops include access to high level coaching, analysis of technique, sports science testing, sport psychology, nutrition, and drugs in sport awareness.

#### Athlete Levy

- A joining levy of \$360-00 GST inclusive will be applicable to all successful NEW athletes.
- A uniform will be provided as part of the overall program.
- All athlete levies must be paid in full within 21 days of selection, or the scholarship offer will be automatically withdrawn; unless agreed Board of Management arrangements have been confirmed.
- The Academy squads will competing in various competitions throughout the program and an additional cost maybe incurred to support some of these tours.

Trials information will be provided at a later date.

Athletes must return completed forms (both sides)

**SWSAS Golf Nominations** 

PO Box 307 Macarthur Square, NSW 2560

Contact: Sarah Shehata

email: sarah @swsas.org.au

Phone: 02 4627 7622 Fax: 02 4627 7633





#### 2014-2015 SWSAS GOLF SCHOLARSHIP PROGRAM

#### Message from the Coach

Dear prospective squad member,

My name is Gavin Meredith and I have been awarded the honour of being appointed as Head Golf Coach for the South West Sydney Academy of Sport (SWSAS), for 2015.

I am currently the Golf Professional at Antill Park Golf Club and have 22 years experience as both a tournament player and teaching golf at high standard facilities such as the Narrabeen Golf Academy and New South Wales Golf Club, La Perouse.

The Golf Program developed under the SWSAS is a varied and in-depth program with a holistic teaching approach giving the participants exposure to experts in various golfing fields and associated golfing technology that would otherwise not be accessible to individuals.

Squad members will receive not only golf instruction but also vital information from industry leaders in sports psychology, golf physiotherapy, strength and conditioning, as well as media training. Squad members will be required to test their skills under high-pressure environments where they will play in various tournaments throughout the year. An individual's progress will be recorded throughout the year via the use of statistical analysis and regular skills tests.

I would like to take this opportunity to mention this is NOT a replacement of squad members current coaching, but an extension of what is being received. In my opinion it is vital that players continue with their current individual coaching at their home club with their Golf Professional. As a coach I have personally seen how this program has benefited some of my students, it also helped me to target areas of their game that were identified by sessions on Trackman and Sam Puttlab.

I urge all young players, if you have the desire to take your game to the next level, please get your application into the SWSAS head office as soon as possible. I am contactable at Antill Park Golf Club on 4677 1240 if you would like to discuss the golf program in detail.

Yours Sincerely, Gavin Meredith

# Nomination Form 2014- 2015 Golf Program

Name:																															_
Address:																															_
													_			Po	ost	coc	de:			_									_
Phone:	(Home)											_ (Mobile)																			
School:		D.O.B:/ Age:																													
Athlete's e- mail: (Compulsory)																															
Parent/s e- mail:																															
Current Handica	ар:		_																												
Home Club:																										_					
Club Address: _	ess: Postcode:																														
Personal Coach	n:								c	Coa	ch	's	pho	ne	(N	/lol	b p	ref	eri	red	): _							_			
Coach email:																															_
Parent/Guardia	n Nam	e:											Ph	on	e (	w)	:_											_			
Parent/Guardia	n Nam	e:											Ph	on	e (	w)	:_											_			
Recent Compe		Histo	ory	:									1			_						_					_				_
Event				Location									Date					Result & Placing													
																		-													
Goal Setting Please briefly dequestions.  1. What do 2. What do	o you h	nope	to a	ach	niev	e in	the	e n	ext	: 12	2 m	on	ths		of (	Go	olf b	Dy :	ans	SW	erii	ng	the	e fo	ollo	owii	ng	two	<b>D</b>		

<u>injuries</u>									
Have you sustained any injury within the last twelve months?	YES		NO						
If yes, please provide details below: (note: This does not affect your nomination for a scholarship)									
Are you fit to participate in all aspects of the SWSAS program for 20	- )14-2015?	YES	NO						
Athlete Declaration									
To the best of my knowledge all of the details I have provided on thi contacted if you wish to clarify any of these details.	s nominatio	n form a	re correct. I can be						
Signed:Date:									
Parent/Guardian									
The South West Sydney Academy of Sport is collecting the about nominations for it's scholarship program. Certain information may You are not obliged to provide the information but if the information unable to process this nomination. Any information provided to standard office hours and updated by writing to the Academy or call	be provide on is not pro the Acader	ed to the ovided the my can	media (see below). ne Academy may be be accessed during						
I consent to the nominee's first name, surname, and town being activity. I understand that all other information provided on this form process will be stored on a database that will only be accessed by subject to privacy restrictions.	and gather	ed throu	ghout the nomination						
I give my child / ward an Academy <b>Golf Scholarship</b> , and if selected, participate in the pr	ogram.	_ permis	sion to nominate for						
I understand that the South West Sydney Academy of Sport will no hospital service required as a result of any injury occurring as responsibility to ensure that I have adequate Private Health Insuran	s a membe	er of SV	VSAS, and it is my						

### **Nominations close Sunday 30 November**

Signed: \_\_\_\_\_\_Date: \_\_\_\_\_

## Please return completed nomination form to:

SWSAS Golf Nominations PO Box 307 Macarthur Square, NSW 2560

Contact: Sarah Shehata

email: <a href="mailto:sarah@swsas.org.au">sarah@swsas.org.au</a>

Phone: 02 4627 7622 Fax: 02 4627 7633