

**RBGF Medical Committee Exemption for the use of an Electric Trolley**

**REQUEST FORM**

This form must be completed by any player seeking permission to use an electric trolley during an RBGF Junior Competition or Match. The form must be submitted to the RBGF Medical Committee in a closed envelope marked with "Medical information" at least 28 days in advance of the first Competition or Match the player wants to take part. The information will be treated by the law of confidentiality. This form **must** be addressed to the RBGF Medical Committee, Du Roy de Blicquy laan 15/2 - 1933 Sterrebeek.

**Name:** \_\_\_\_\_ **Fed Nr:** \_\_\_\_\_

**Date of birth:**

**Height:**

**Weight:**

**Please explain the nature and history of your disability and why it requires the use an electric trolley:**

**Are you receiving any treatment for this disability?**

**If your condition relates to a cardiac problem, do you experience any shortness of breath, etc.?**

**Please provide a current medical certificate and report from your medical practitioner, including the following information in the report:**

1. The name of the disability
2. The extent of the disability
3. The prognosis for improvement
4. Whether you use any aids and if so, when and where are these required for use for playing golf

**Please indicate the event/s you are submitting this request for:**

The RBGF Medical Committee will use the information you supply on this form and in any supporting documentation to assess and process your request.

I certify that the information supplied on this form and in any supporting documentation is true and correct and I hereby consent to the processing of the information supplied on this form and in any supporting documentation for the purposes and in the manner outlined above.

**Signature Player:**

**Signature Parent:**

**Date:**

**Email:**

**Contact Telephone:**