



Physical Address
Kings Park Athletic Stadium
41 Isaiah Ntshangase Road
Durban
4001

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Website: www.kznathletics.co.za

KWAZULU-NATAL ATHLETICS

SUB-ELITE ATHLETE DEVELOPMENT PROGRAM APPLICATION FORM

1. PARTICULARS OF ATHLETE

FULL NAME	
IDENTITY NUMBER	
GENDER	
RACE	
HEIGHT	
WEIGHT	
RESIDENTIAL ADDRESS	
POSTAL ADDRESS	
OCCUPATION (if applicable)	
NAME OF SCHOOL/ TERTIARY INSTITUTION/ EMPLOYER	
CONTACT NUMBER	
EMAIL ADDRESS	

CLUB	
DISTRICT	

2. PARTICULARS OF COACH

COACH'S NAME	
COACH'S CONTACT NUMBER	
COACH'S EMAIL ADDRESS	
COACHING QUALIFICATIONS	
STATUS OF CRIMINAL RECORD CLEARANCE	
STATUS OF CHILD PROTECTION REGISTER CLEARANCE	
STATUS OF SEXUAL OFFENDERS REGISTER CLEARANCE	
STATUS OF SAFE GUARDING AWARENESS CERTIFICATION	

3. ACHIEVEMENTS

	DATE OF ACHIEVEMENT	NAME OF COMPETITION IN WHICH ACHIEVEMENT WAS RECORDED	EVENT IN WHICH ACHIEVEMENT WAS RECORDED	ACHIEVEMENT (POSITION, TIME, DISTANCE, ETC)	WORLD RANKING (IF APPLICABLE)
A					
B					
C					
D					
E					

4. OTHER NOTEWORTHY ACHIEVEMENTS

A	
B	

C	
D	
E	

MOTIVATION

The club is to attach a separate motivation for each athlete, signed by the chairperson and bearing the official stamp of the organization.
I, the undersigned, confirm that all facts submitted herewith are true and correct.

NAME OF CLUB CHAIRPERSON

SIGNATURE

DATE

WITNESS 1

WITNESS 1

CLUB STAMP

You are requested to email all applications to: KwaZulu-Natal Athletics office , Ms. Happiness Mkhize at support@kznathletics.co.za and copy development@kznathletics.co.za by **Thursday, 12:00 on the 25th of September 2025.**