BG & Eliteidræt

Application form Birkerød Gymnasium

APPLICATION FORM FOR BG ELITE SPORTS

Acceptance is based on your athletic background and not in terms of your academic achievements. Application and acceptance via this form is a prerequisite for enrolling in the BG Elite Sports Program

Name:			CPR.nr.:					
Address:								
Postal nr.:			City:					
Tlf.nr.:			E-mail:					
Current School:								
Field of sports:			Sports					
r leiu or sports.			club/orga nisation/t eam:					
Dicipline:								
You are more than welcome to supply further documents/information regarding your sports activities.								
Team Danmark god	(Please indicat	e with a X for [·]	Team Denmark acceptance.	Ja/Nej – Yes/No)				
Ple level:(i.e talent group,	ease indicate current youth/senior etc)							
	I level over the past two onal team, ranking, etc.)							
My regiona years:(local unic								
Expected amount of	f time dedicated to athleti	c practice – if accepte	d in STX/HF/I	В:				
	ours dedicated to ng/competitions:	No. Of ho dedicated transport:	l to	Divided across:	No. of days			
Where is your t	main location for raining/practice?							
Appl	ying to:			gymnasium				

As a general rule, applicants should spend a minimum of 10-15 hrs a week dedicated to their athletic practice.

Individual applicants are asked to indicate latest relevant results on p. 2

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Signatures:

Applicant:		The	20			
					Signature	
Parent/Guardian:		The	20			
					Signature	
Current school:						
Please send this ap	plication form al	ong with your	general appli	cation to Birk	kerød Gymnasiur	n.
	If you have a Stine	ny questions reg Møllebro at stm	arding this forn @birke-gym.dk	n, please conta c	ict	
Most recent relevant result	(s):					
Please supply a referral	from your club/team	regarding your a	thletic level and	talent.		
Possible supplementary co	omments from your cur	rent school:				
Please use this space to in and athletic practice:	dicate your considerat	ions and motives fo	r applying to BG E	Elite Sports, and h	now you plan to combin	e your studies