

Sports Academy Expression of Interest Form 2027



Please complete the following Expression of Interest form for your child to be considered for the 2027 Heathmont College Sports Academy Program. The completed form must be returned to the college office in person or via email: Heathmont.co@education.vic.gov.au by Monday 2 November 2026.

Student Name: _____

Gender: ☐ MALE ☐ FEMALE ☐ SELF-DISCRIBED

Date of Birth: _____

2027 Year Level: ☐ Year 8 ☐ Year 9 ☐ Year 10 ☐ Year 11 ☐ Year 12

Term Taster Program:

The Sports Academy is offering students the opportunity to trial the program by means of a “Term Taster”.

The “Term Taster” program will allow students to join the Sports Academy for one full term and enjoy all the benefits of professional coaching, strength and conditioning training, and mentoring.

The “Term Taster” program is a great way to determine whether or not the Sports Academy is the right program to assist you in becoming a stronger athlete, while developing your skills in your chosen sport with a more professional approach. (Please see the Sports Academy Handbook 2027 for further information).

Please circle which program you would like to enrol in. Note: you can only join the Term Taster if you are **new** to the Sports Academy Program.

ANNUAL or TERM TASTER

Sports Academy Program Preference: (Please rank in order of preference 1-4)

AFL/AFLW: _____ BASKETBALL: _____ Athlete Development Program (ADP): _____

SOCCER: _____

NOTE: The Athlete Development Program (ADP) focuses on talent identified through a range of different sports including soccer, field hockey, athletics, cricket, baseball and more. ADP offers individualised athlete development targeting strength, speed, agility, explosiveness, and sport related growth to physically help athletes compete in their chosen sport.





ADP Nominated Sport:

Current Sports _____

Current Club: _____

Playing Position: _____

Name of Coach: _____

Coach Details:

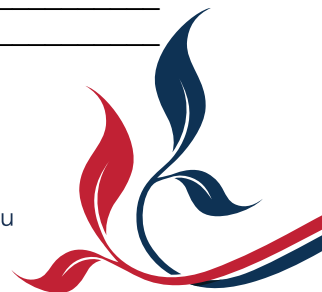
Phone: _____

Email: _____

Representations and Achievements:

Please List any other community involvements (Hobbies, Community Groups etc.)

What are your goals and aspirations in your chosen sport over the next 12 months?





How did you hear about the Sports Academy Program?

☐ Internet ☐ Word of Mouth ☐ Recommendation ☐ Other

Parent/ Guardian Name: _____

Contact Email: _____

Contact Phone: _____

Kind regards,

Brian Vaughns
Sports Academy Director

