**LUSL MEDICAL EXEMPTION PRO FORMA**

PUBLISHED | 2 OCTOBER 2025

**MUST BE ATHLETIC UNION AUTHORISED AND VERIFIED**

# MEDICAL EXEMPTION NOTES

*This document should be read and completed in conjunction with LUSL 4.1.5 (‘Medical Exemptions’).*

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| **Name of Institution** |  |
| **Name of Player** |  |
| **Sport** (E.g. Basketball) |  |
| **Team Playing For** (E.g. UCL Men’s 2) |  |
| **League of Team Playing For** (E.g. Intermediate Premier) |   |
| **Team Normally Playing For** (E.g. UCL Men’s 1) |  |
| **League of Team Normally Playing For** (E.g. Intermediate Premier) |  |
| **Date and Time of Fixture** |  |
| **Length of Absence** (Number of fixtures missed for the team the player would normally represent as a result of the injury for which a medical exemption is being requested) |  |
| **Medical Professional Conducting Treatment** (Name and profession. Said professional must be prepared to verify that it is upon their advice that the individual is required to re-enter competition in a gradual manner if requested.) |  |
| **Number of Medical Exemptions Granted Previously This Season for Named Player** |  |
| **Athletic Union (or equivalent) Authorisation** *The Individual signing this form hereby declares all of the details provided to be true and accurate; that the individual named is returning to competition following a period of absence due to injury; and that they have been advised by a medical professional to re-enter competition gradually.* |
| **Name** |  |
| **Position** |  |
| **Signature** |  |
| **Date** |  |

**PERTINENT REGULATIONS**

**LUSL 4.1.4.1 Medical exemptions** Medical exemptions are not permitted for knockout competition fixtures.

**LUSL 4.1.5 Medical exemptions** Individuals returning from injury who have established majority for a team may be authorised to be selected (listed on a team sheet) for a lower ranked team by their Athletic Union (or equivalent) for league fixtures only. A medical exemption form, completed and verified by an Athletic Union (or equivalent) representative prior to the fixture, must be presented at the league fixture in question when team sheets are being verified and ‘M.E.’ marked against the name(s) of the applicable individual(s) on the team sheet to indicate their status. For a copy of a medical exemption form, please see Appendix E (‘LUSL Medical Exemption Pro Forma’).

**LUSL 4.1.5.1** Exemptions only apply to one league fixture in a lower ranked team while returning to fitness.

**LUSL 4.1.5.2** An individual may only be granted a medical exemption if they are returning following a period of absence from competition, they cannot take part in successive fixtures. I.e. they must have been unable to take part in a fixture due to injury prior to the medical exemption being required.

**LUSL 4.1.5.3** Medical exemptions may only be applied if the return from injury is being overseen by an acceptable medical professional.

**LUSL 4.1.5.3.1** Institutions/Playing Entities are advised that BUCS may request a formal letter from said medical professional(s) to verify the validity of the exemption. In doing so no confidential details will be required. Named medical professionals must therefore be prepared to confirm validity of the exemption.

**LUSL 4.1.5.3.2** The named individual must be prepared to permit the treating medical professional identified on the medical exemption form to verify that they are;

* Treating the individual, and;
* It is upon their medical advice the individual is acting.

**LUSL 4.1.5.4 Multiple medical exemptions** Where an individual requires an extended period to return to fitness, within a season, their Athletic Union (or equivalent) can apply to the BUCS Executive for clearance. Such an application must be made before the individual in question participates in any further fixtures. An extended period is anything beyond one fixture.