

TOUR APPLICATION FORM

This form must be completed in full and sent to the Chairman of your section not less than three months prior to the start of the tour.

Team of Group or Teams:.....

Tour Manager/Organiser's Name:.....

Address:.....

.....Post code:.....

Telephone Nos: (H) (M)

Email address:.....

Tour Destination/Venue:.....

Name of Host Contact:..... Telephone No:.....

Dates of Proposed Tour From:..... To:.....

Matches to be played:

Opposition	Date	Venue
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1
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2
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3
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Accommodation Address:

Composition of Party:

Players Coaches Parents

Others

Cost of Tour per person: Player £ Adult £.....

Travel Insurance provided by:.....

IThe Tour Manager / Organiser confirm that all the above information is correct and all the requirements as outlined in Welwyn RFC's Tour Policy have been met and will be adhered to.

Signature of Tour Manager / Organiser:.....

Date:

Name Mini / Junior Chairman:.....

Signature Mini / Junior Chairman:.....