

(ii) (iii)

## **APPLICATION TO TRAVEL / TOUR**



Application must be submitted: -

**Inter-District/Zone**: 4 weeks prior to departure date. **Bond \$100.00** 

**Overseas:** Expression of intention to tour <u>1 year.</u>

Application 3 months prior to departure date. **Bond \$1000** 

		ıb/School:	
The	nature of this appl	lication covers a Tour, which is,:	(please circle
	Internal	Overseas	
The	destination(s) of t	he Tour is/are:	
(a)	) District? State District:		
(b)	Zone? State Zone	:	
(c)	Overseas? State	Country:	
Nam	e of Host Club/Bo	dy:	
Appr	oximately number	r of Touring Party:	
Appr	Plavers	r of Touring Party:	
(a) (b)	Players Coaching Staff	r of Touring Party:	
(a) (b) (c)	Players Coaching Staff Managers	r of Touring Party:  ( ) ( ) ( )	
(a) (b) (c)	Players Coaching Staff	r of Touring Party:	
(a) (b) (c) (d) (e)	Players Coaching Staff Managers Trainers	r of Touring Party:  ( ) ( ) ( ) ( ) ( )	
(a) (b) (c) (d) (e) <b>Age</b>	Players Coaching Staff Managers Trainers Support  Group of Players 1 / Mod teams	r of Touring Party:  (	
(a) (b) (c) (d) (e) <b>Age</b> Mini , U/13	Players Coaching Staff Managers Trainers Support  Group of Players 1 / Mod teams	r of Touring Party:  (	
(a) (b) (c) (d) (e) <b>Age</b> Mini, U/13 U/15	Players Coaching Staff Managers Trainers Support  Group of Players 1 / Mod teams	r of Touring Party:  (	
(a) (b) (c) (d) (e) <b>Age</b> Mini, U/13 U/15 U/17	Players Coaching Staff Managers Trainers Support  Group of Players 1 / Mod teams	r of Touring Party:  ( ) ( ) ( ) ( ) ( )	
(a) (b) (c) (d) (e) <b>Age</b> Mini , U/13 U/15 U/17 U/18	Players Coaching Staff Managers Trainers Support  Group of Players 1  / Mod teams / U/14 Years / U/16 Years	r of Touring Party:  (	

	Funds will be generated/ra levies: (Please itemise and in	aised through the following activities/g			
	Brief description of Purpos	se of Visit:			
	Has Approval been provide (Please circle and attach relev	· · · · · · · · · · · · · · · · · · ·			
	Yes or No				
	Contact particulars of Tour Organiser / Manager:				
	Name:				
	Address:				
	Telephone: (H)	(W)			
	(Fax <u>)</u>	(Mob)			
	Endorsement by Club / League Executive that the Club / League accresponsibility for the Tour / Travel.				
	Name:				
	Position:				
	Signature:				
eri ms	SE NOTE: national Tours will only be considered for needs to supply Club colours and team to	or teams 13 years and over.			
	OFFICE USE ONLY				
	District Club:				
	Zone Body:				