**Application to Host an Incoming Tour**

* This application should be completed and returned to Hon Sec England Rugby Schools at least one month prior to hosting the tour.

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| --- | --- | --- | --- |
| **Contact Details** | | | |
| Name of School/College: |  | | |
| Address: |  | | |
| Telephone number: |  | Affiliated CSU: |  |
| Teacher i/c Rugby: |  | Contact number: |  |
| Email: |  | | |

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| --- | --- | --- |
| **Touring Team Information** | | |
| Name of the School / College / Team touring: |  | |
| Their Home Union: |  | |
| Name of Tour Manager: |  | |
| Their email address: |  | |
| Date: | Teams/Ages: | Venue: |
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If necessary, list additional games on a separate sheet or overleaf.

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| **Tour Operator** (if known) | | | | | | |
| Tour Operator: | | |  | | | |
| Name of Contact: | | |  | | | |
| Email address: | | |  | | | |
|  | | | | | | |
| **FOR ENGLAND RUGBY FOOTBALL SCHOOL’ UNION USE ONLY: A copy of this form MUST be reviewed prior to Tour permission being granted.** | | | | |
| **Tour approved by:** | | | | |
| Name: |  | | Position: |  |
| Signature: |  | | Dated: |  |

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