

a) This application should be submitted to the State/Territory Union, to which the Rugby Body or entity Team resides.
b) The appointed nominee of the State/Territory Union will comment and approve.
c) Submit to the appointed nominee of Rugby Australia via email at community@rugby.com.au

TOUR DETAILS						
Name of Touring Rugby E	Body/Entity Team:					
Age/Grade of team (eg. U11's, 1st XV, Senior):						
Overseas Touring Team Registration Form Provided: NO						
Tour dates (inclusive) From: To:						
Country(s) of destination:						
Number in official touring party: Players: Officials: Supporters: TOTAL:						
All Players currently registered to Touring Rugby Body/Entity Team: YES NO						
If No, number of players currently registered to other Rugby Bodies/Entity Teams						
Tour Organiser Name: Email:						
Tour Organiser Phone (H)): (W):	(F):	(M):			
NAMES OF TEAM MANAGE	MENT					
Manager:		Coach:				
Asst Manager:	sst Manager: Medical:					
MATCH ITINERARY (Pleas	se attach additional pages should	d further match de	tails be required)			
<u>Date of Match</u>			Venue/Region			
TOUR APPROVALS						
	If of Rugby Body/Entity Te	eam				
By completing this Registration Form, I as manager of the touring party have read and agree to the Rugby Australia Touring Terms and Conditions						
	ame:	Signature:				
Approval of State or		Jigilatai C.				
	•					
	ame:	Signature:				
Approval of Rugby A						
Date:	Name:					
Signature:			UNION STAMP OR SEAL			



RUGBY Declaration by Officials

Rugby Australia Ltd PO Box 800 Surry Hills NSW 2010 AUSTRALIA

PLEASE PRINT

Dear Rugby Australia, Please find attached an application from the ______Club/School/Team/Union, in respect of a proposed tour to ____ As Manager of the touring party, I make this application with the full knowledge that the permission of Rugby AU to tour is conditional on my team abiding by the ARU Code of Conduct and related policies. It is clearly understood, that as Manager, I will be responsible for the conduct of the team whilst on tour and adhere to the Rugby Australia Touring terms and conditions Yours sincerely, Name: Signature: TOURING TEAM MANAGER PLEASE PRINT _____President/Secretary/School Principal of the Rugby Union, having read the foregoing, agree to ensure that all touring team members are aware of the Rugby Australia Touring Terms and Conditions, and their individual responsibility to their Club/School/Team/ Union and Rugby Australia. Signature: Name:

PRESIDENT/SECRETARY/PRINCIPAL

Overseas Touring Team Registration Form

en Name	Surname	D.O.B.	Club/School/Rugby Body	ARU Rego. #
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completing the	e overseas touring team	registration form I acknowledge	owledge that all touring participants	s are bound by the ARU Code of Co
ase note if the	e touring party is greater	ınan 23 piayers, piease	submit a seperate page along with	i inis document.
			Sign:	

Team Official details

Name of Club/School/Team/Union:

Traine of Club/School/Teal	
COACH	
Name:	
Qualification/Accreditation:	
Mailing Address:	
Suburb/State/ PC	
Phone (H):	
Phone (W):	
Mobile:	
Email:	
ASSISTANT COACH	
Name:	
Qualification/Accreditation:	
Mailing Address:	
Suburb/State/ PC	
Phone (H):	
Phone (W):	
Mobile:	
Email:	
Lilian.	
MANAGER	
Name:	
Qualification/Accreditation:	
If Applicable	
Mailing Address:	
Suburb/State/ PC	
Phone (H):	
Phone (W):	
Mobile:	
Email:	
PHYSIOTHERAPIST	
Name:	
Qualification/Accreditation:	
Mailing Address:	
Suburb/State/ PC	
Phone (H):	
Phone (W):	
Mobile:	
Email:	
Lilian.	
ADDITIONAL TEAM MANAG	GEMENT STAFF
Name:	
Qualification/Accreditation:	
If Applicable	
Mailing Address:	
Suburb/State/ PC	
Phone (H):	
Phone (W):	
Mobile:	
Email:	

Note: Team Officials details are to be completed on this form by the Team Manager/ Tour Coordinator and provided as part of the tour application to tour overseas form NB: Notification of any changes/alterations accepted on this form only.



RUGBY AUSTRALIA TOURING TERMS AND CONDITIONS

Unless otherwise stated, terms in this document shall have the same meaning as defined in the ARU Code of Conduct. A copy of the ARU Code of Conduct is available in the <u>Policy Register</u>.

By completing this Registration Form, you (or if the participant is under 18 years of age, that participant's parent or legal guardian on behalf of the participant) agree:

- The information you have provided is true, correct and accurate.
- The information you have provided will be used and disclosed for the purposes specified in the Privacy Policy, including being used by your club and Member Union to administer the Game and provide rugby activities and rugby-related services. A copy of the ARU Privacy Policy is available in the Policy Register.
- To comply with and abide by the rules and regulations which govern the Game and its authorised variations, including, World Rugby Laws of the Game and Regulations (www.worldrugby.org), the ARU Code of Conduct and related ARU Policies (including ARU Member Protection Policy & Inclusion Policy).
- You have fully disclosed any suspension you may be serving imposed by any sporting body, and will disclose any suspension imposed in the future.
- You have fully disclosed any incident, matter or set of circumstances (irrespective of when it occurred) that does, or has the potential to, render you an unfit or improper person to be a Participant in Rugby Australia. This includes any incident, matter or set of circumstances that could damage the game of Rugby or bring in to question the integrity and good character of its Participants.
- Rugby AU may deregister you at any time by notice.

INSURANCE

Registered participants of the Game are provided basic levels of cover under the ARU Insurance Plan for Sports Injury (Accident) cover, excluding cover for medical expenses where there is any Medicare Contribution (i.e. Medicare Gap). It is recommended that all participants travelling overseas consider Private Health and Travel insurance as required for their individual circumstances, over and above the coverage provided under this Plan. Further information is available at Running Rugby and ARU Insurance plan.