

**OUTGOING TOUR FORM — CLUBS**

THIS FORM MUST BE COMPLETED IN FULL AND RETURNED TO THE RFL AT LEAST THREE MONTHS PRIOR TO YOUR PROPOSED DATE OF DEPARTURE. PLEASE SEND IT VIA EMAIL TO [**TOURS@RFL.UK.COM**](mailto:TOURS@RFL.UK.COM)

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| **1. TOURING CLUB** | |
| Name |  |
| Age Group |  |

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| **2. CLUB OFFICIAL ORGANISING TOUR** | |
| Name, Role |  |
| Address |  |
| Phone Number |  |
| Email Address |  |

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| **3. TOUR DETAILS** | |
| Country, Region to be Toured |  |
| Name of Host Club |  |
| Proposed Tour Dates | From: To: |

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| **4. CONTACT AT HOST CLUB** | |
| Name, Role |  |
| Address |  |
| Phone Number |  |
| Email Address |  |
| Confirmation from overseas Governing Body? |  |

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| **5. MATCHES TO BE PLAYED** | | |
| Opposition | Date | Venue |
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| **6. STAFF AND COACHES** | | |
| Name | Role | DBS Number (If Applicable) \* |
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| \* All coaches must hold a valid, clean DBS certificate. | | |

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| **7. PLAYER: STAFF RATIOS** | |
| Number of players travelling |  |
| Number of staff members/ coaches travelling \* |  |
| \* All coaches must hold a valid, clean DBS certificate | |

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| **8. INSURANCE** |
| Clubs will be insured by the RFL’s Personal Accident and Public Liability policies for playing rugby league whilst on tour, providing RFL approval has been granted. Details of the cover can be found [HERE](https://www.rugby-league.com/get-involved/club-support/operations/insurance). Our insurance covers clubs for all rugby league activity (i.e. training sessions and matches), and nothing else.  Every member of the travelling party must also purchase appropriate travel and medical insurance prior to their proposed date of departure, which may cover, as an example, temporary injury, loss of earnings, medical and legal expenses or any other type of injury not mentioned in the policy.  You will need to obtain additional travel insurance (which will cover you for any repatriation costs should a player become injured during the match and need specialist travel home). For this cover we recommend Bartlett’s Insurance company who can be contacted by phone on 0113 258 5711 or by email on [mail@bartlettgroup.com](mailto:mail@bartlettgroup.com). An example of the rates for this cover can be found [HERE](http://staging.rugby-league.com/uploads/docs/Rugby%20Travel%20Rates%202022.pdf). |

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| **9. DECLARATION (PLEASE PRINT AND SIGN)** |
| On behalf of the touring club, I hereby confirm that:   1. Every player travelling is/ will be covered by appropriate insurance, with adequate cover for rugby league activity, travel and any other activities undertaken on the tour (including legal, medical and repatriation costs). 2. The touring club has completed a Risk Assessment. 3. The information on this form is accurate to the best of my knowledge.   Signed: Name: Date: |

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| **10. PLAYERS AND EMERGENCY CONTACTS \*** | | | |
| Player Name | Emergency Contact Name | Emergency Contact Phone No. | Relation to Player |
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| \* Personal information will be stored only for safeguarding purposes and will be deleted upon completion of the proposed tour. | | | |

**- END -**