**NOTIFICATION OF tour within england**

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|  | | | |
| Club: |  | | |
| Address: |  | | |
| Organiser: |  | Contact Number: |  |
| Email address: |  | | |

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| --- | --- | --- | --- | --- |
| **TOUR DETAILS** | | | | |
| Age Grades involved (If Junior identify Male or Female |  | | | |
| Purpose of Tour: |  | | | |
| Date of Tour: | From |  | To |  |
| Event/Match Timings: | Start |  | End |  |
| Notes: |  | | | |

|  |  |
| --- | --- |
| **VENUE DETAILS** | |
| Tour Location |  |
| Address: |  |
| Contact Number: |  |

|  |  |
| --- | --- |
| **HEALTH & SAFETY** | |
| Please confirm that a risk assessment will be carried out: | Y/N |
| Please confirm that you have sufficient Supervising Adults carrying DBS clearances – Provide list of names and DBS expiry dates as attachment | Y/N |
| Please confirm that there will be appropriate First Aid cover: | Y/N |

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| **DECLARATION AND APPROVAL** | | | | |
| Organiser Signature: |  | | Date: |  |
| Approved by CB Governance Committee: | | | | |
| Approval Signature: |  | | Date: |  |
| Name: |  | Position: |  | |