



INTER ZONE/CA TOUR PERMIT

NAME OF CLUB/ASSOCIATION, ZONE

TYPE OF TEAMS (Club/Association, Zone) _____

AGE GROUP _____

NUMBER OF PLAYERS _____

TOUR IN CHARGE _____

NUMBER OF OFFICIALS _____

DETAILS OF TOUR _____

DATE OF TOUR _____

HOST ORGANISATION _____

MODE OF TRAVEL _____

TYPE OF ACCOMODATION FOR PLAYERS _____

ESTIMATED COAST OF TOUR (TOTAL) _____

APPROVAL IS GRANTED FOR THE ABOVE TOUR BY:

Signed by Secretaries of:

CLUB _____

COMPETITION MANAGEMENT CENTRE _____

ZONE _____

COPIES TO BE FORWARDED TO HOST ZONE/CLUB SECRETARY