**Application for Rugby Camps.**

Applications will not be processed without a COVID Risk Assessment.

**Your Details**

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| --- |
| Name: |
| Role within Club: |
| E-mail: |
| Tel no: |

**Club Details**

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| --- |
| Name of Club: |
| Proposed date(s): |
| Proposed start and finish times: |
| Who is providing the camp: |

Please complete the information below to show how the players attending will be grouped for training sessions, how many spaces there are in each group, and how many coaches will train each group.

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| Age grade players in group: |
| Number of places: |
| Number of coaches: |
| Whom from the club will be overseeing the camp? |

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| Tel no: |
| Will they be on site for the camp? |
| Is there a risk assessment where the camp is taking place? |
| Who is the safeguarding officer? |
| Who is the Rugby Safe Officer? |

Date of application:

When completed to be sent to Terry Williams, Hon Secretary, Cornwall RFU please: terry344@sky.com