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| Club Details |
| Home Club & Association Name: | Click here to enter text. |
| Away Club & Association Name: | Click here to enter text. |
| Match Details (as scheduled)  |  |
| Age Group/s: | Click here to enter text. |
| Match Date: | Click here to enter a date. |
| Kick off times: | Click here to enter text. |
| Venue: | Click here to enter text. |
| REFEREES INFORMATION  |  |
| Appointed Referees Branch: | None |
| host information |  |
| Contact Person: | Click here to enter text. |
| Contact Phone: | Click here to enter text. |
| Contact Email: | Click here to enter text. |
| Submitted by |
| Club: | Click here to enter text. |
| Name: | Click here to enter text. |
| Position: | Click here to enter text. |
| Date: | Click here to enter a date. |
| APPROVAL INFORMATION |
| Host Associations Approval given by | Click here to enter text. |
| Signature | Click here to enter text. |
| Visiting Associations Approval given by | Click here to enter text. |
| Signature | Click here to enter text. |

1. This form must be completed when a Football NSW member Association team or club wishes to play trial matches against a team or club from another Football NSW member Association other than their own.
2. This form must be approved by both the Host Clubs Association and the Visiting Clubs Association.
3. Once both Associations have approved the trial match the Host Clubs Association is to keep this document on file should Football NSW request a copy for insurance purposes.
4. There is no need for Football NSW to approve this request if both associations have approved.
5. Trial matches must only be played on approved grounds suitable for football.
6. Grounds must be inspected and goalpost safety checked by the host club prior to usage.
7. Only players registered through MyFootballClub to a member Football NSW Club will be covered for sporting injuries.
8. Football NSW Associations & their member clubs trial matches must be approved for Public Liability coverage to apply.

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| INTER ASSOCIATION TRIAL MATCH APPROVAL (ASSOCIATION Use Only) |
| Approval Received from both Associations: |   |
| Date Communicated: |  |