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**TEAM TRAVEL ARRANGEMENTS FORM**

**TO BE COMPLETED BY TEAM MANAGER**

|  |  |
| --- | --- |
| **Name of Rep Team** |  |
| **Date of Arrival** |  |
| **Time of Arrival** | Prior to Midday Midday to 4pm  4pm-5pm 5pm-6pm  6pm-7pm 7pm-8pm  8pm-9pm after 9pm |
| **Date of Departure** Teams should not schedule return flights prior to 7pm on the last day of tournament (where possible) as HQ cannot guarantee the tournament will be completed in time for earlier flights. |  |
| **Departure Time** | Prior to Midday Midday to 4pm  4pm-5pm 5pm-6pm  6pm-7pm 7pm-8pm  8pm-9pm after 9pm |
| **Method of Travel** | Team Air  Team Bus  Individual Travel |
| **Team Accommodation** |  |
| **Team Accommodation Address** |  |
| **Team Manager Details** | Name |
| Email |
| Mobile |
| **Team Coach Details** | Name |
| Email |
| Mobile |
| **Team Assistant Coach Details** | Name |
| Email |
| Mobile |
| **Umpire Details** | Name |
| Email |
| Mobile |
| **Technical Bench Official Details** | Name |
| Email |
| Mobile |
| **Please return to** [**secretary@rockhamptonhockey.org**](mailto:secretary@rockhamptonhockey.org) **by** |  |