



## WELSH RUGBY UNION

### Application Form for Permission to stage Mini and Junior or Youth Tournament

Name of Club:

Proposed Tournament Date:

Proposed Venue:

Age Group:

Name of Clubs Participating :


#### **Please Tick**

Confirm that there will be  
First Aid Cover throughout the day

Confirm that only WRU Licensed  
Referees will officiate

Signed: \_\_\_\_\_

Club Secretary \_\_\_\_\_

Contact Details \_\_\_\_\_

Dated: \_\_\_\_\_

#### **Please return to Peter Owens:**

- a. *by post to Golate House, 101 St Mary Street, Cardiff, CF10 1GE; or*
- b. *by fax to 02920 822474; or*
- c. *by email to [powens@wru.co.uk](mailto:powens@wru.co.uk)*