



TOURNAMENT & TRAVEL FORM

PERMISSION FOR TOURNAMENT & TRAVEL BY GSSC TEAMS

DATE OF APPLICATION	STAFF COACH	STAFF MANAGER	TEAM

NAME OF EVENT	LOCATION	DATE OF EVENT(S)

DIRECTOR OF TOURNAMENT	CONTACT PHONE No.	CONTACT EMAIL ADDRESS	TOURNAMENT WEBSITE

ENTRANCE FEE	TOTAL COST OF THE EVENT	AMOUNT SUBSIDIZED BY TEAM	COST PER PLAYER

IMPORTANT QUESTIONS

WHO WILL BE THE HEAD COACH OF THE TEAM FOR THIS EVENT?	WILL THE TEAM BE MISSING ANY LEAGUE GAMES? DOES IT FIT WITHIN YOUR SEASONAL PLAN?	WILL PLAYERS BE MISSING SCHOOL? IF SO HOW MANY DAYS?	DO YOU HAVE ENOUGH FUNDS IN YOUR TEAM ACCOUNT?

HOW MANY TOURNAMENTS HAS THE TEAM REGISTERED FOR & PERMITTED TO TRAVEL TO THIS YEAR? PLEASE PROVIDE THE NAMES ALONG WITH THE DATES: INCLUDE. ONTARIO CUP & THE COVI IF ENTERED
1.
2.
3.
4.
5.

BUDGETARY QUESTIONS TO CONSIDER

TRAVEL BUDGET? CONSIDER PLANE, TRAIN, BUS OR CAR	HOTEL? COST PER NIGHT? CONSIDER NUMBER OF PLAYERS IN EACH ROOM AND 3 STAFF ROOMS	COST FOR 3 MEALS/DAY? CONSIDER BREAKFAST \$12, LUNCH \$17, DINNER \$25	INCIDENTAL COST? FOOD AFTER A GAME, SOCIAL ACTIVITY, GAS, INSURANCE

DOES THE TEAM HAVE ENOUGH FUNDS TO COVER THE EVENT?

FOR THIS EVENT DOES THE TEAM NEED TO FUNDRAISE? IF SO, PLEASE ATTACH COPY OF THE APPLICATION TO HOST A CLUB FUNDRAISER.

GENERAL COMMENTS FOR SUPPORT FOR THIS APPLICATION

APPLICATION SUBMITTED BY	SIGNATURE	DATE

For the application to be approved all of the above questions must be answered truthfully and submitted it to Michelle. All signatures must be attained for the approval of the application. All denied applications will be returned along with a written explanation.

DIRECTOR OF COACHING & PLAYER DEVELOPMENT	SIGNATURE OF APPROVAL	DATE

GSSC - VP OF FINANCE	SIGNATURE OF APPROVAL	DATE

DIRECTOR OF REP BOYS/GIRLS	SIGNATURE OF APPROVAL	DATE