



TRIAL MATCH APPLICATION FORM

Please complete the following and return to HCCF as soon as possible.

CLUB MAKING APPLICATION:			
TEAMS INVOLVED IN TRIAL MATCH:			
TEAM 1:		DIV:	
TEAM 2:		DIV:	
GROUND:			
PROPOSED DATE:		TIME:	
NUMBER OF REFEREES REQUIRED:			
If the trial match is against a non-HCCF Club, has the match been sanctioned by the other Clubs Member Federation?	YES	NO	

PLEASE NOTE:

The Club making the application is responsible for sourcing a suitable ground for the trial match.

Once notified, HCCF will inform Referees Assoc of their requirements.

You must confirm the HCCF Secretary has received this document before starting the match. HCCF must sanction the match to comply with Insurance and Liability Policies.

Scan and email this document to: admin@hccf.org.au

HCCF USE ONLY			
RECEIVED BY:		DATE RECEIVED:	
REFEREES NOTIFIED ON:		CONFIRMED ON:	
CLUB NOTIFIED ON:			