



ALTERNATE TRAVEL REQUEST

Name:	
Position:	<i>Circle one:</i> PLAYER COACH MANAGER UMPIRE TECHNICAL OFFICIAL
Team:	
Venue:	
Date/s:	

Place a ✓ next to the option/s which best fits your request:

Unable to travel from Toowoomba to the tournament venue	
Unable to travel from the tournament venue to Toowoomba	
Unable to stay at the same Accommodation as the team	

Reason:

Details of alternate arrangements:

By signing this document, I _____, understand that:
(Player/Parent/Guardian/Official Name)

- I take full responsibility for myself/my child in relation to the requested alternate arrangements;
- I relinquish THA and its appointed Officials of their responsibility of the care of myself/my child; and
- If I am a player, full representative costs will still need to be met.
- If I am an Official, the maximum amount I will be reimbursed is the original cost booked by THA.

_____ / ____ / ____
Player/Parent/Guardian/Official Signature *Date*

OFFICE USE ONLY: APPROVED NOT APPROVED

Position	Signature	Date
Hockey Manager		