



RUGBY CANADA

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RUGBY CAMPS/CLINICS SANCTIONING APPLICATION

A: Name of Club/Organiser: _____ Email Address: _____

Home Phone: _____ Cellular : _____ Business: _____ Fax: _____

Address: _____
Street Name City Province Postal Code

B: Rugby Camp/Clinic Name: _____

Rugby Camp/Clinic Location: _____
(Facility Name)

Street Name City Province Postal Code

Date of Rugby Camp/Clinic (dd/mm/year): From _____ To _____

Number of Players/Teams: _____

Are all out of country players/teams approved for their participation by their home Union? This approval must be supplied to Rugby Canada (usually a tour out form plus attachments) Yes No

Are all match officials registered with your provincial Rugby Referee Society? Yes No

Are ALL domestic players/coaches/managers/medical staff registered with Rugby Canada? Yes No

***If yes, proceed to section D**

C: Payment enclosed: \$ _____

Cheque Credit Card: Visa Master Card Other _____

Name on Card: _____

Card Number: _____ Security Code: _____

Expiry Date: _____

Rugby Camp / Clinic Rate Matrix

Duration	Rugby Camp/Clinic Fee
1-7 Days	\$250
8-14 Days	\$350
14+ Days	Call for Quote

Clarification and Classification:

A Rugby Camp/Clinic is defined as a more frequent rugby training session in a short period of time (i.e. Youth / Skills Clinic at a club). Typically held in offseason months, this area of sanctioning must be approved jointly with the host Provincial Union administration, must stay internal, cannot participate in league or other games and approved based on number of days. A full roster of players needs to be provided no later than 1 day into the program.

***Note:** If all players are registered with Rugby Canada, Rugby Camp or Clinic Fees are NOT applicable; however, the application form still must be submitted to your Provincial Union for forwarding to Rugby Canada.

D: *** Rosters of all participating players must be sent to Rugby Canada, either pre-camp/clinic (if available) or not later than 1 week post camp/clinic.**

Print Name: _____ Signature: _____ Date: _____
(dd/mm/year)

Please submit 4 weeks in advance For additional information please contact: Your Provincial Rugby Union Administrator

Mail to: Scott Asselstine, Rugby Canada, 30 East Beaver Creek Rd., Suite 110, Richmond Hill, ON L4B 1J2

Email to: sasselstine@rugbycanada.ca

*****A copy will be sent to you and your Provincial Union once approved.**

FOR OFFICE USE ONLY: SANCTION NUMBER: _____ APPROVAL DATE: _____