



Application for Free One Event Licences

Training Day, Practice Day & Have A Go Days Only

This form must accompany the permit application

Club Name: _____

Date of Event: ____/____/____

Event Type (please tick):

- Training Day
- Practice Day
- Have a Go Day

Club Contact Name: _____

Email: _____

Name of the Event: _____

Number of Licences you require: _____

Signed by Club Secretary: _____