Travelling Team Contact Details

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| --- | --- | --- | --- | --- | --- |
|  | | |  | | --- | |  | |  |  |
|  |  |  |  |  |
| Team |  |  | | |
|  |  |  |  |  |
| Lead Contact |  |  | | |
|  |  |  |  |  |
| Phone |  |  | | |
|  |  |  |  |  |
| Email |  |  | | |
|  |  |  |  |  |
| Alternative Contact Info |  |  | | |
|  |  |
|  |  |
|  |  |  |  |  |
| Travel dates: From |  |  | | |
|  |  |  |  |  |
| To |  |  | | |
|  |  |  |  |  |
| Traveling to: |  |  | | |
|  |  |  |  |  |
| Flight/Ferry  Details: Outbound |  |  | | |
|  |  |  |  |  |
| Inbound |  |  | | |
|  |  |  |  |  |
| Accommodation Details |  |  | | |
|  |  |
| *Please list where team  will be staying.* |  |
|  |  |
|  |  |  |  |  |
| Additional Info |  |  | | |
|  |  |
| *Please record any other  relevant information* |  |
|  |  |
|  |  |  |  |  |
| Travel insurance: |  | *Please confirm that suitable travel insurance has been taken out* |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| People on trip: |  |  | | |
|  |  |
| *Please list all players/coaches  traveling with the team* |  |
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Please return this completed form to BSUK Safeguarding Officer Mark Caress

([mark.caress@bsuk.com](mailto:mark.caress@bsuk.com))