

TRIAL SANCTIONING FORM



Club Name	
Trial Opponent	
Grade	
Venue	
Date of Trial	
Start Time	
Number of Periods (Halves, Quarters, Thirds)	
Duration of Periods	
Referee Required – Yes / No	
Requested by- Individual's Name	
Position	
Club	
Contact Phone Number	
Date of Request	

The completed form should be emailed to the NHRU: nicole@nhru.com.au
no later than 10 days prior to the trial.

This form will be signed and emailed by return as confirmation of approval.

NHRU APPROVAL

Name

Position- NHRU

Date