

Australasian Team Roping Association

15/429 Peel Street

TAMWORTH NSW 2340

Email: admin@teamroper.com.au

Phone: 0488 471 069

Application for School / Clinic / Development Day / Training Day

Choose main event for coverage:	Intended Dates:	Estimated number of participants:
- Indiana		
□ Jackpot		
□ Clinic/School		
☐ Development/Training		
Description for website: eg. Events, cost to participants, limit on participants, contact person etc		
Name of Club or Promoter to be insured:		
Name of class of Fromoter to be insured.		
Name of instructor(s) conducting event: (require cover under ATRA's policy)		
Name and/or physical address of venue where event is to be held:		
Owner of venue:		
Name and phone number of person completing this application:		
Postal Address:		
Email:		
Signature:		Date