

IN CONFIDENCE

Scottish Touch Association ("STA") Affiliation Form for Regional Associations ("RA")

1. Purpose

This document is a formal affiliation agreement between the Scottish Touch Association and *[insert Regional Association]*. It sets out the roles and responsibilities of both parties in the context of the STA's Articles of Association.

2. Length of Agreement

This Affiliation Agreement will be for a period of 3 years from 1 January 2011 and will be reviewed on an annual basis. Either party may make proposals to amend the agreement but such proposals should be made by 31 October in the relevant year with any agreed amendments taking effect from 1 January of the following year.

3. Responsibilities of the *[insert Regional Association]*

The *[insert Regional Association]* agrees to:

- be formally constituted and abide by the rules set down in its constitution;
- be accountable to its membership and affiliates;
- follow all existing STA policies including current and future STA National Development Plans passed by the STA AGM and to encourage its members and affiliates to do so;
- endeavor to send team(s) to the National Championships in line with the STA Development Plan;
- make its financial status known to their members and the STA Board within a timescale agreed between both parties;
- enforce any legal requirements in the administration of Touch events such as Child Protection in sport to affiliated club and individual members;
- on request, provide a local action plan for the development of Touch in its region;
- encourage affiliation of local Touch events to the region through the provision of referee training and other services to such events;
- ensure any PR, sponsorship and marketing activity is not in conflict with that of the STA;
- collect a minimum of 5% of player entry fees from Affiliated Touch Competition Organisers;
- pay the STA by 1 December annually an amount no less than 25% of the combined player entry fee amount for the preceding 12 months;
- retain an accurate database of players, referees and coaches including any relevant qualifications;
- locally implement STA disciplinary guidance and actively promote the STA's Code of Conduct for players, coaches, referees and administrators; and
- provide a voting delegate to act on behalf of the *[insert Regional Association]* at the STA's AGM.

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- [*additional responsibilities for the specific RA agreed between the RA and STA*]

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SCHEDULE 1

Form of Annual Audit for the [insert regional association name]

A. Participation Details

1. Numbers of non-recurring participants in affiliated Touch competitions in your area:

MEN: 180 + WOMEN: 150 = 330 TOTAL ADULTS

BOYS: 0 + GIRLS: 0 = 0 TOTAL YOUTH

TOTAL PARTICIPANTS: 330

2. Number of affiliated Touch events in your area:

LEAGUES: 3 ONE DAY TOURNAMENTS 3

YOUTH EVENTS: 0

3. Number of qualified¹ specialists in your area:

PLAYER COACHES: 20 REFEREE COACHES: 5

REFEREES: 170 OTHER (PLEASE SPECIFY) _____

B. Financial Status

4. Basic financial information:

TOTAL INCOME: £ 5616.28 TOTAL EXPENDITURE: £ 4726.54

BALANCE AT 30 NOVEMBER: £ 5647.71

Information supplied by: D Miller (TREASURER) (NAME)

On: 25/5/16. (DATE)

¹ For player coaches this means certified to Community Coaching level, for Referee Coaches this means certified to the Level 1 Touch Europe Referee Coaching qualification or higher; and for Referees this means qualified to a Touch Europe Level 1 badge or higher.

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5. Confirmation

"We confirm for and on behalf of [name of RA] that [name of RA] shall comply with the STA Affiliation Guidance set out at section 1 above (together with any additional responsibilities mutually agreed with the STA as detailed in section 3 above) in return for the benefits conferred by Affiliation set out in the National Development Plan (together with any additional benefits agreed with the STA and detailed in section 3 hereto). We further confirm that [name of RA] shall submit to the STA on this day and annually thereafter the Annual Audit in the form set out in Schedule 1 hereto. [Name of RA] shall provide any further information as so reasonably requested by the STA from time to time.

We note that either party may withdraw from this agreement by providing at least 2 months notice in writing. Such notice shall outline the reason for the withdrawal."

For the [insert Regional Association]

[Signature] (signature) D. Jones (name)
Treasurer (position) 25/5/16 (date)

[Signature] (signature) KIRSY WILKINSON (name)
SECRETARY (position) 25/5/16 (date)

For the STA

_____ (signature) _____ (name)
_____ (position) _____ (date)
_____ (signature) _____ (name)
_____ (position) _____ (date)

4. Responsibilities of the STA

The STA agrees to:

- provide strategic and reasonable logistical support for the development of Touch where appropriate and requested by *[insert Regional Association]*;
- be accountable to its membership and affiliates;
- follow all STA policies including current and future STA National Development Plans and to encourage their members and affiliates to do so;
- arrange for the provision of the STA National Championships on an annual basis;
- provide a pathway for players, referees and officials who are STA members to participate at international Touch events;
- actively promote and encourage participation in affiliated Touch competitions whilst applying relevant sanctions to those taking part in unaffiliated events;
- coordinate and maintain a master calendar of touch events taking place across Scotland in order that clashes between events and courses are minimised;
- subject to agreement by *[insert Regional Association]* arrange for the provision of a national series (STS) which will include a 1-day weekend event in *[insert Regional Association]*'s region;
- provide access to goods and services purchased at reduced rates for the benefit of the *[insert Regional Association]* and its affiliates and members (e.g. insurance).
- *[additional responsibilities for the STA in support of the RA agreed between the RA and STA]*