

CARY RUGBY FOOTBALL CLUB REGISTRATION WWW.CARYRUGBY.COM

PLAYERS NAME _____

DATE OF BIRTH _____ AGE _____ GENDER _____

STREET ADDRESS _____

CITY _____ ZIP _____

EMAIL (main) _____

HOME PHONE _____ MOBILE PHONE _____

TOUCH or TACKLE PROGRAM _____ Summer / Fall / Both _____

JERSEY SIZE (Youth or Adult) _____ XS/S/M/L/XL _____

EMERGENCY CONTACT _____

PHONE #1 _____ PHONE #2 _____

EMAIL _____

MEDICAL INSURANCE _____

MEDICAL CONDITIONS _____

CIPP #_(will be provided by the club) _____

By signing this form both the athlete and parent/guardian acknowledge that Rugby is a fast paced sport involving vigorous contact among players, during both games and the preparation for games (together hereinafter referred to as "rugby"), and that inherent in rugby are risks of significant physical injury. The athlete and parent/guardian represent that they have read this release, understand it's meaning, and in order to participate in rugby, voluntarily waive potential future claims. In consideration for allowing the athlete to participate in rugby and seek the benefits of rugby, the athlete and the parent/guardian hereby assume all risks associated with participation in rugby, and hereby waive in advance all claims against USA Rugby and all subsidiary Unions and member clubs, including Cary Rugby Club, sponsoring person and organizations, coaches, officials, other players (on any team), their parents, and the persons owning or providing the space for rugby (hereinafter "releases"), and agree to hold harmless and indemnify the releases regarding any claim premised upon any injury to the athlete (or athlete's death), or to the parent/guardian, caused in whole or in part by any action or inaction by a release (including a release's negligence), in connection with rugby, with travel to or from rugby, or with rugby – oriented social activities sponsored by a release.

PARENT OR LEGAL GUARDIAN (Please Print) _____

SIGNATURE _____ DATE _____

Dues: Touch - \$150 for Fall Season (\$50 discount for siblings): Pay through the website @ <https://caryrugby.com> (Credit Card or Paypal Preferred), or bring this form and check to practice, or mail this form along with a check to: **Cary Rugby Club, 212 Sampson St., Raleigh, N.C. 27609** Questions? Contact kiwi@caryrugby.com

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MEDICAL CONSENT

Any player who has had a concussion in the last 3 years must have a Doctor's written clearance to play, before contact practice or match play.

I, _____ (parent or guardian) of the city of _____ in the county of _____, North Carolina, do hereby state that I am the natural parent or legal guardian having custody of _____, and minor/dependent, age _____, born _____.

In connection with my child's participation in rugby, I authorize any accompanying adult bringing my child to your treatment facility to consent to any x-ray, examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care to be rendered to the minor under the general or specific supervision, and on the advice of any physician or surgeon who is licensed to practice when the need for such treatment is immediate and when efforts to contact me are unsuccessful. I understand that I assume all liabilities and expenses for the above. I waive all claims against the above referred to adult, physicians, hospitals, and their employees, ambulatory care, etc. in connection with the decisions for such immediate care.

SIGNED _____ DATE _____ PARENT OR
GUARDIAN

PLAYER CODE OF CONDUCT

As a member of Cary Rugby I agree to abide by the following code and to actively promote the rugby tradition of sportsmanship at all times. My behavior and influence towards fans, coaches, teammates, opponents, and game officials will seek the highest standard. I understand that I and my club will be held accountable for both individual and group behavior and that of our fans.

1. I realize that Cary Rugby is not affiliated with the Town of Cary, Cary Schools and Wake County Schools but that my and our behavior will reflect on my club, my family and my community.
2. The use or possession of tobacco, drugs, including steroids, or alcoholic beverages in any form will not be tolerated regardless of quantity. Any violation occurring at any time during the present season may result in a suspension for the rest of the season from the Cary Rugby and from participating in the North Carolina Youth Rugby League or the Touch Rugby Youth League.
3. The use of profane or abusive language is not acceptable and will not be tolerated. This includes directing language to opponents, coaches, game officials and spectators. Violation can result in placement in the "Sin Bin" as instructed by the Referee. Repeated offenses will result in my being sent out of the match and reports being sent to the North Carolina Youth Rugby Football Union for disciplinary action including suspension from play.
4. I agree to abide by the Laws of the Game and the rules of its governing bodies. As the laws state in incidents of "foul play" i.e. fighting, taunting, or dangerous play, I will be subject to placement in the "Sin Bin: as instructed by the Referee. Repeated offenses will result in my being sent out of the match and reports will be sent to the North Carolina Youth Rugby Football Union for disciplinary action including suspension from play.

As the parent of _____, I have read the above rules and I agree that my son/daughter will honor the rules, decisions and disciplinary process governing members of the Cary Rugby Club, North Raleigh Youth Rugby Association, the North Carolina Youth Rugby Football Union, and USA Rugby.

SIGNED _____ DATE _____ PARENT OR
GUARDIAN

SIGNED _____ DATE _____ ATHLETE