

NORTH COUNTY RUGBY CLUB Inc.
2010/11 H.S. Season Registration (Dec-Feb)



Program Fees	Full Package \$200
Fee Breakdown	Season Dues (Dec-Feb) - \$100
	National & Local Registration - \$40
	Rugby shorts and socks - \$40
	Rugby Ball - \$20
	Mouth guard - \$2
	Minimal Package \$140

Player is full-time HS student
 referees, fields, lights, uniforms, equipment, hosting, etc
 Optional if previously purchased and in good condition
 Optional but recommended
 Purchase optional, but must be worn during match
 Only dues + registration (returning players)

Please include the following documents:

- A copy of the player's birth certificate
- A copy of Family Medical Insurance Card
- A copy of School Identity Card

Player Name _____ Male / Female
 First Middle Last

Birth Date ____/____/____ Height _____ Weight _____ School Grade (1-12) _____
 Chest Size (in.) _____ Waist Size (in.) _____ Shoe Size _____

Address _____ CA _____
 Street City State ZIP

Player Email (Optional) _____ Player Cell Phone _____

Parent/Guardian Email _____ Parent Phone _____

Emergency P.O.C. _____ P.O.C. Cell Phone _____

Relationship to Player _____

Medical History and Medication: Please note any history of medical problems or disabilities. Attach additional sheet if necessary.

I hereby give my permission for my son or daughter to participate in the North County Youth Rugby Program. It is expressly understood and agreed that North County Rugby will not be held responsible for any losses of property or for any bodily injuries, or the results thereof, incurred and suffered by the applicant on any property of the above named club. Information will not be shared or sold to outside agencies. I acknowledge that my child's photo may be taken and used for identification or promotional purposes by North County Rugby Club, and that providing proof of age or school attendance is a requirement for participation in Southern California Youth Rugby leagues.

Signature of _____ Date _____
 Parent/Guardian

FOR OFFICE USE ONLY

Date _____ Total Amount Paid _____ Check # _____

NORTH COUNTY RUGBY CLUB

**PERMISSION TO PARTICIPATE, RELEASE, INDEMNITY
and
AUTHORIZATION FOR EMERGENCY MEDICAL AND DENTAL TREATMENT**

PERMISSION

The undersigned parent(s) or legal guardian(s) of _____, hereby grant(s) permission for him/her to participate in the sport of rugby, and related activities, with the **North County Rugby Club**, and further consent(s) that he/she may be transported to such activity in a private automobile operated by an adult or player volunteer. In granting this consent, the undersigned understands and acknowledges the physical nature of the sport of rugby and the risks inherent in such physical activity.

IT IS UNDERSTOOD that adult supervision of the activity will be under the direction of the coaches and the mandatory conditions for volunteer player drivers are: a valid California Drivers License; parent permission to operate the automobile to transport other players; the automobile to be driven is in good operating condition; proper automobile liability insurance; and only the correct number of players are to be in the vehicle. This means **ONE PLAYER PER SEAT BELT**. Transporting players in the back of a pick-up is **NOT ALLOWED**.

RELEASE AND INDEMNITY

In consideration for the above player being permitted to participate in the activity specified above, the undersigned agree(s) to not make or join in a claim or civil suit for injury, death or property damage against the **North County Rugby Club**, and **Southern California Youth Rugby, the Southern California Rugby Referees Society and all affiliated entities**, including, without limitation, their respective administrators, staff or volunteers participating in the above activity and hereby release(s) those entities, including, without limitation, their respective administrators, staff or volunteers, from all actions, claims and demands the undersigned or the player may hereafter have for injury, death or property damage, as consistent with public policy, arising out of participation in the activity specified above.

Further, in a claim or civil suit is made or brought against the **North County Rugby Club, Southern California Youth Rugby, the Southern California Rugby Referees Society and all affiliated entities**, including, without limitation, their respective administrators, staff or volunteers as result of the actions of the above-named player for injury, death or property damage, the undersigned agree(s) to indemnify and hold harmless the afore-mentioned, including, without limitation, their administrators, staff or volunteers from any and all such claims, suits, damages, including judgments and/or settlements, whether such claims arise out of the negligence or intentional misconduct of the above-named player, whether such negligence is active or passive and whether individually or in concert with others.

AUTHORIZATION

The undersigned as parent(s) or legal guardian(s) of the above named minor player hereby authorize and grant to the supervising or a participating adult permission in the event of illness or injury while participating the activity specified above to consent to the following:

Any X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care to be rendered to the minor under the general or special supervision and upon the advice of a physician and surgeon licensed under the provisions of the Medical Practice Act or to consent to an X-ray examination, anesthetic, dental or surgical diagnosis or treatment and hospital care to be rendered to the minor by a dentist licensed under the provision of the Dental Practice Act.

Said, authorization to include the release of any medical or dental records to the attending physician or dentist for review.

Date: _____

PRINT: _____
Parent or Guardian

SIGN: _____
Parent or Guardian

PRINT: _____
Name of Player

PRINT: _____
Date of Birth of Player

USA Rugby Individual Participation Agreement

MEDICAL INSURANCE AGREEMENT AND USA RUGBY RULES ACKNOWLEDGEMENT

1. I acknowledge that I have a medical insurance policy in my name that has a minimum of \$100,000 in medical coverage **WITH NO RESTRICTION FOR ACCIDENTS WHILE PARTICIPATING IN SPORTS**. I understand such insurance will be my primary source of payment should medical treatment be necessary as a result of my participation in the Activity.
2. I agree to abide by all International Rugby Board, USA Rugby, territorial and local area union rules and regulations, including to be bound by the arbitration procedures therein, that I am aware of and understand, for any dispute regarding my right to participate in the Activity, as set forth in the Bylaws of USA Rugby, as they are amended on a periodic basis, which I understand are available on the USA Rugby web site (www.usarugby.org).
3. I affirm that I am not suspended or banned from play or participation by any club local area union, territorial union, or national union, and I authorize USA Rugby to verify my citizenship status with the appropriate governmental agencies
4. I am aware that USA Rugby has the right to revoke my CIPP enrollment, and therefore my eligibility to play or coach, in the event of any violation of the aforementioned statement.

WAIVER & RELEASE, ASSUMPTION OF RISK AND PARENTAL INDEMNIFICATION

In consideration of me being permitted to participate in any way in **USA Rugby, its member unions, clubs, organizations and individuals** sponsored Activities ("Activity"), I agree:

1. I understand the nature/dangers of **USA Rugby** activities and believe that I am qualified to participate in such Activity. I further acknowledge that I am aware the activity will be conducted in facilities open to the public during the Activity. I further agree/warrant that if at any time I believe conditions to be unsafe, I will immediately cease further participation in the Activity.
2. I FULLY UNDERSTAND that: (a) **USA RUGBY** Activities involve risks and dangers of **SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH** ("Risks"); (b) these Risks and dangers may be caused by my own actions, or inaction's, the actions or inaction's of others participating in the Activity, the condition in which the Activity takes place. Or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and **I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** incurred as a result of my Participation in the Activity.
3. **HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS USA RUGBY**, their member unions, territorial unions, clubs, respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the "Releasees" herein) from all liability, claims demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations and further agree that if, despite this release, I or anyone on my behalf makes a claim against any of the Releasees named above, **I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE OR COSTS ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.**

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND IT'S TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THAT THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PARENTAL CONSENT AND INDEMNIFICATION AGREEMENT

I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such "activity". I hereby release, discharge, covenant not to sue and **AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS** each of the Releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasees, **I WILL INDEMNIFY, SAVE AND HOLD HARMLESS** each of the Releasees from any litigation expenses, attorney fees, loss liability, damage or cost any Releasees may incur as the result of any such claim.

SIGN: _____

Parent or Guardian

CODE OF CONDUCT

North County Rugby follows USA Rugby's code of ethics. Please read and discuss the following, then sign and return it to the team coach.

PLAYERS CODE OF CONDUCT

- Play for *enjoyment*
- Play hard, but fair
- Play by the laws of the game
- Be committed to your team and attend all matches
- Never argue with the referee's decisions and control your temper
- Work equally hard for yourself and for your team
- Be a good sport and applaud all good play whether by your team or by your opponent
- Remember the goals of the game are to have fun, improve your skills and play responsibly
- Be *humble* in victory, and *gracious* in defeat

PARENTS AND SPECTATORS CODE OF CONDUCT

- Applaud the performances of both teams
- Be positive with the referees
- Acknowledge the efforts of referees
- Let children play their game, not the parent's game
- Praise actual efforts, not results
- Set an example for children
- Do not criticize, belittle or question the ability of any official, coach, or volunteer
- Control your emotions at games and events. Do not yell at or criticize other players, coaches, parents or officials

North County Rugby reserves the right to ask a parent or a player to leave the premises of a game or practice, if their behavior is not consistent with the above Code of Conduct.

I acknowledge that I have read and understand the North County Rugby Club Code of Conduct.

Player's Signature _____ Date _____

Parent Signature _____ Date _____