

SENIOR RUGBY - CONSENT FORM

COMPLETED FORM TO BE SUBMITTED TO YOUR COMPETITION MANAGER

PLAYER (please print clearly)

Name:	MyRugby No.
Club:	Competition / State:
Date of Birth:	Actual Age Grade: _____ (ie. U17's)
Playing Position:	Senior Grade Level: _____ (ie. U20's, 4 th Grade)
Phone.	E-mail:

ASSESSING COACH

Name:	MyRugby No.
Contact No.	E-mail:
Coaching Qualification: Level [2] [3] please circle Expiry _____	SmartRugby Qualification: Expiry _____

Coach to assess the player against the following considerations. If the answer is NO to any of these considerations, then the player shall NOT be considered capable of competing safely with players in the proposed competition.

PLEASE NOTE: Players who are under eighteen and play in the Front Row (prop or hooker) must also apply for approval from the ARU prior to participation in senior rugby, as outlined in Schedule B - Exception for Front Row.

Physical Development:	Does the player's level of physical development allow the player to compete with players in the proposed senior rugby competition?	yes	no
Skill Level:	Is the player's skill level comparable with other players in the proposed senior rugby competition?	yes	no
Level of Experience:	Does the player have the experience to compete with other players at a comparable standard of competition?	yes	no
Standard of Competition:	Is the standard of competition in the proposed senior rugby competition suitable to allow the player to compete safely?	yes	no

In my opinion, the player's physical development, skill level and experience is sufficiently high that the player is capable of competing safely with players in the proposed senior rugby competition.

I have explained to the player and his/her parent or guardian that the player will be competing against older players and this may involve an increased level of injury risk.

Name:	Signature:	Date:
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PARENT / LEGAL GUARDIAN

I confirm that:

- I am a parent or legal guardian of the abovementioned player;
- I have been provided with a copy of the ARU's Senior Rugby Policy including Schedules A & B of that Policy;
- The coach has explained to me that, in his/her opinion, the player's physical development, skill level and experience is sufficiently high that he/she is capable of competing safely with players in senior rugby competition;
- It has been explained to me that the risk of injury may be increased by the player playing in the proposed senior rugby competition; and
- I understand that rugby is a contact sport and, like all contact sports, players are exposed to risk of injury. I also understand that the level of risk may be heightened where a player participates in a senior rugby competition in circumstances where the player's physical development, skill level and experience are inferior to that of the players he or she will play against. In addition to understanding these risks, I also agree, to the extent permitted by law, to waive all claims for liability against any participant (including players, coaches, volunteers and administrators) and release every such participant from all liability that may be incurred in connection with the player's participation in the proposed senior rugby competition.

Name:	Signature:	Date:
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COMPETITION MANAGER

I confirm that:

- A copy of this Policy (complete with Schedules A & B and the Consent Form) is included in the competition rules; and
- Records of completed Consent Forms are kept.

Name:	Signature:	Date:
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