



Capital District Youth Rugby Non-contact Rugby 2009 Application

Fee: \$30 per child

Includes; USA Rugby Registration [required for liability insurance], League T-shirt
Capital District Youth Rugby (CDYR) participation will only be allowed if a registration form is completed for each player. Return your application with check payable to

Capital District Youth Rugby

and mail to:

Capital District Youth Rugby, c/o John Durant, 9 Sandra Sue Dr, Loudonville, NY, 12211

Checks and applications must be received **PRIOR TO PARTICIPATION**.

For more information, call 785-6023, email youthrugby@yamil.com or visit our website:

<http://www.cdyr.org>

Child's Name: _____ Male Female

Address: _____ City: _____ Zip: _____

Home Phone _____ Birth Date: _____ Grade: [Fall '09] _____

School: _____ Shirt size: [circle one] YS YM YL YXL AS AM AL AXL AXXL

Paid by: Check _____ Cash _____ Online _____

Medical Information

Please indicate if your child has difficulty with the symptoms listed below:			
Heart Problems	Shortness of Breath	Asthma	Diabetes
Kidney Problems	Vision Problems	Chest Pains	Hearing Impaired
Glasses, Contacts	Concussions	Seizures	Headaches
Bone Joint	Skull Fracture	Past Operations	Allergies

Other: _____

Emergency Contact Name: _____ Phone: _____

Parent Consent

I, _____, the parent or guardian of the player named above, do hereby give my permission in my absence for any necessary emergency medical treatment to be administered by a licensed physician. I also give my approval for his/her participation in all Capital District Youth Rugby activities and assume all such risks and hazards incidental to participation. I absolve, indemnify and agree to hold harmless Capital District Youth Rugby and its programs, sponsors, coaches and other participant's from all such risks and hazards.

Parent/Guardian Signature _____ Date _____

Print Name _____ Relationship _____

Medical Insurance Provider _____ Policy # _____

Please indicate how you can help CDYR this season

Would you be interested in supporting your child's team?

Team Parent _____ Help Coach _____