

# South Suburban Youth Rugby Club



- High School Boys
- High School Girls
- U12 and U14 (grades 4-8, co-ed)
- Rookie Rugby (grades 1-3, co-ed, non-contact)

## Registration for 2019 Spring Season

- 1. REGISTER WITH RUGBY ILLINOIS:** <https://rugbyillinois.org/register>  
PLEASE COMPLETE THIS REGISTRATION FIRST  
(fee schedule: High School = \$55, U12 & U14 = \$45; Rookie Rugby = \$5)
- 2. COMPLETE AND TURN IN SSRC CLUB FORMS (ATTACHED):**
  - SSRC Player Information & Medical Consent Form
  - SSRC Informed Consent & Player Responsibility Statement
- 3. PAY ANNUAL CLUB MEMBERSHIP DUES:** make checks payable to 'South Suburban Rugby Club' according to the following schedule...  
High School players = \$325  
U12 & U14 players = \$225  
Rookie Rugby = \$125  
Dues will include t-shirt, rugby shorts, and will cover costs of indoor training facilities at Roma, outdoor fields, team equipment and kit, match-day fees including referees & trainers, bus service for high school teams, and other associated costs.  
*\* all players will need to provide his/her own mouthpiece*  
*\* multiple player family discount = \$50 discount for additional player from same family*

**\*\*ALL FORMS MUST BE TURNED IN & DUES PAID IN FULL BEFORE A PLAYER CAN PARTICIPATE\*\***

Visit our WEBSITE for more information [www.sscobrarugby.com](http://www.sscobrarugby.com)  
Like us on FACEBOOK [www.facebook.com/southsuburbanrugbyclub](http://www.facebook.com/southsuburbanrugbyclub)  
Send us an EMAIL to get on our mailing list [sscobrarugby@gmail.com](mailto:sscobrarugby@gmail.com)

**South Suburban Rugby Club 2018-2019  
Player Information & Medical Consent Form**

First & Last Name	
Date of Birth	
Grade & School	
Parent name	
Parent name	
Email address (player)	
Email addresses (parents)	
Phone number (player)	
Phone numbers (parents)	
Emergency phone & contact	
Home address	
T-shirt size	
Short size	
Height	
Weight	
Medical conditions	
Allergies	
Medications	
Other considerations	

**Medical Consent:**

As the parent/guardian of the player listed above in the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent and authorization for: (1) the administration of medical treatment deemed necessary by the appropriate medical professional; and (2) the transfer of the child to any hospital or medical facility reasonably accessible; and (3) agree to full and complete payment for such examination, treatment, or hospital care.

**Signed/parent/guardian**

**Date**

# **South Suburban Rugby Club 2018-2019 Informed Consent & Player Responsibility Statement**

I, \_\_\_\_\_ voluntarily agree to participate in activities associated with South Suburban Rugby Club.

- I understand that participation in the sport of rugby is accompanied by an inherent risk of injury. This risk may include, but not be limited to, musculoskeletal injury, fractures, lacerations, spinal cord injury, head trauma, and in very rare instances, death.
- I accept this risk and agree to hold harmless any and all officers, coaches, administrators and medical personnel associated with South Suburban Rugby Club for any occurrence of injury.
- Further, I understand that said risk extends to transportation to and from, and participation in, all South Suburban Rugby Club activities. This may include, but not be limited to, practice sessions, meetings, matches, fundraising events and coaching clinics.
- Further, we, the undersigned participant and parent/guardian accept responsibility for the procurement of appropriate medical clearance from the player's primary care physician for this activity and agree to reveal to the coaching/training staff any condition which may impact this athletic activity or treatment in an emergency situation.
- I accept full financial responsibility for any and all expenses related to any and all injuries related to the aforementioned activities, which I (or my child) may suffer. I am aware of, and in compliance with, the requirement of the United States of America Rugby Football Union that all participants have medical insurance coverage.
- I understand and accept that while participating in South Suburban Rugby Club activities that I will be expected to conduct myself according to the highest levels of ethical and sportsmanlike behavior. I agree to accept full responsibility for any illegal or unsportsmanlike behavior while involved in these activities.

**Signed/player**

**Date**

**Signed/parent/guardian**

**Date**