

Morris Rugby Football Club
2008-2009 Morris Lions U-15 Boys Program

Participants must submit a completed registration form prior to acceptance in the program.

Return with check, or return form and go to www.morrisrugby.org and use the U15 paypal option

Player Details

Last Name: _____ **First Name:** _____
Address: _____ **City, Zip Code:** _____
Home Phone _____ **Date of Birth:** _____
Cell Phone _____
School: _____ **Current Grade:** _____
Player E-Mail Address: _____

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: _____			

Does your child take medication in certain emergencies? _____
If yes please provide the coach written instructions.

Parent/Guardian Contact Information

In case of practice cancellation, advise you of schedule changes, and to provide general program information, please provide the following information:

Names of both Parent(s)/Guardian(s) (if applicable):

Parent: _____
Primary Contact # _____ Email address: _____
Cell Phone # _____ Email address: _____

Parent: _____
Primary Contact # _____ Email address: _____
Cell Phone # _____ Email address: _____

Please indicate how you can help Morris Rugby this season

Team Parent _____ PR/Photographer _____ Assistant Coach _____ Where Needed _____

Interested in becoming a team sponsor for \$150.00 or more? If so, please provide a contact name and phone number.

Player Code of Conduct

As part of your commitment to the Morris Rugby U-15 Rugby Program, you as a club member are expected to conduct yourself in such a manner that reflects positively on the ideals and sportsmanship values of our program, and that you will adhere to the rules and regulations that universally govern NJ State High School sports activities. Any infractions of such conduct and rules will be reviewed and acted upon by the coaches on a case-by-case basis.

As acknowledgement of the Code of Conduct expectations of the Morris Lions High School Rugby Program, you are hereby asked to sign below in recognition of your responsibilities.

Player: _____

Parental Release

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 participation in all Morris Rugby Corporation activities and assume all such risks and hazards incidental to participation. I absolve, indemnify and agree to hold harmless Morris Rugby Corporation and its programs, sponsors, coaches and other participant's from all such risks and hazards. Additionally, I acknowledge that I have a medical insurance policy in my name and such insurance will be my primary source of payment should medical treatment be necessary as a result of my son's participation in this activity.

Parent/Guardian Signature _____

Date _____

Application Details

**Return this application
and \$225.00 registration fee made out to Morris Rugby to:
Mike Stumpf, 39 Fredrick Place Morris Township, NJ 07960
Or – go to www.morrisrugby.org and choose the palpal option for U15's**

**For more information, please email mjstumpf@optonline.net
or visit the U-15 Boys link on our club website at www.morrisrugby.org**

(All checks should be made out to: Morris Rugby)