



Thunder Rugby Registration Form

Name: _____

Date of Birth: _____

Shirt Size: _____

Grade: _____

School: _____

Indigenous Ancestry (not required, but informative):

Rugby experience: _____

Other sports: _____

Parent / Emergency contact

Name: _____

Address: _____

Cell Phone: _____

Email: _____

Secondary

Name: _____

Address: _____

Cell Phone: _____

Email: _____

Health Card Number: _____

Current / past injuries:

Allergies / medical conditions / dietary:

Player accepts and acknowledges that rugby is a game of risk of serious injury and agrees to accept all risks associated with playing and indemnifies and saves harmless Thunder Rugby, its directors, officers, coaches, organizers, and volunteers and other players, coaches, referees and participants from any claims for personal injury or loss whatsoever arising from participation by this player in this camp / tournament howsoever caused. This waiver is binding on the player, personal representatives, estate and administrators of the player. If under 18 the legal guardian of the player has signed this waiver on behalf of the player.

Parent / Guardian signature

Date

**CONSENT FORM
FOR CHILD PARTICIPATING IN MODERATE RISK AND OVERNIGHT ACTIVITY**

Date:

Dear:

In consideration of Thunder Rugby offering my child _____, an opportunity to participate in a summer camp / rugby tournament July 4-7,2018. I waive any and all claims I may have against, and release from all liability and agree not to sue the Board of Thunder Rugby its officers, employees, agents, volunteers and representatives, and the Ministry of Education for any personal injury, death, property damage or loss sustained as a result of my child's participation in the field trip.

I hereby give my consent and acknowledge by my signature that:

Students will be going to Shawnigan Lake school August 20-23, 2019

_____ Initial

They will be travelling by Private vehicle

_____ Initial

On this trip, the youth will be playing rugby, hiking and swimming. There will be no lifeguard in duty

_____ Initial

The students will be supervised by Thunder coaches, chaperones. Your child will not necessarily be supervised by an adult at all times

_____ Initial

My child has no illnesses, allergies or disabilities that may require special attention, except as

_____ Initial

described here: _____

I am aware of the usual risks and dangers inherent in participation in all of the activities associated with this trip and of the possibility of personal injury, death, property damage or loss resulting from the activities. The dangers and risks may include, but are not limited to:

_____ Initial

I will supply suitable equipment and clothing for my child's participation in all activities associated with the field trip, including: rugby wear (cleats mouthguard), swim wear, sun wear, sleeping wear

_____ Initial

Accidents can be the result of the nature of the activity and can occur with or without any fault on either part of the athlete. By allowing your son/daughter to participate in this activity, you are accepting the risk of an accident occurring, and agree that this activity, as described above, is suitable for your child.

_____ Initial

I am 19 years of age or more and have read and understand the terms of this Consent and Waiver and understand that it is binding upon me, my heirs, executors and administrators.

_____ Initial

Date:

Signature of Witness

Signature of Parent/Guardian

Printed Name of Witness

Printed Name of Parent/Guardian

Address

Address

NOTE: This Consent and Waiver must be signed by ALL custodial parents or guardians of a child who is under the age of 19 years.