



NANT CONWY RUGBY CLUB

Select one: **New Player** or **Re-registration.**

PART A	Please complete.	
Surname:	First Name(s):	
Date of Birth:	Names of sibling members (if any):	
Home Address:		
Postcode:		
<u>Please indicate Father or Mother / Home or Office etc. where appropriate</u>		
Home Phone:	Work Phone :	
Mobile No:	E-mail address :	
School attended:		
Any previous experience of playing rugby?		
Medical conditions / allergies. Please give full details (on a separate sheet if necessary).		
Father's Name:	Mother's Name:	
Has father played rugby? Is father interested in: Coaching/helping coach? First Aid? Other support activities?	Has mother played rugby? Is mother interested in: Coaching/helping coach? First Aid? Other support activities?	
Parental consent : (Please \checkmark or X as appropriate)		
I give permission for my child(ren) to be involved in any pre /post match publicity / photographs/ video		<input type="checkbox"/>
I give permission for the club to retain this application for the purpose of player welfare and parental contact		<input type="checkbox"/>
Parent's signature:		Date:

PART B	WRU REGISTRATION	
All Mini and youth players are required to be registered with the WRU. A separate WRU young player registration form should be obtained from the club and completed. <u>Two passport-sized photos are required.</u>		
Club use only: Form completed:	Photos supplied:	Subscription paid: