

# GLENDALE RUGBY FOOTBALL CLUB

<http://www.glendalerugby.com>

## TRY League - Glendale Teams

*May 11 – June 26, 2010*

The Glendale Rugby Club will run its Glendale team in Colorado's TRY League from May 11-June 26, 2010. The program is for both boys and girls, ages 5 – 15 (17 for HS girls.) Players will be placed in different age groups and ability levels. The cost per participant is \$120.00. Fees include league fees, socks, jersey, shorts and individual player fees. [Checks can be made out to: Glendale Youth Rugby. Paperwork and fee can be sent to: City of Glendale, Attn: Jenna Anderson, 950 S. Birch St., Glendale, CO 80246. Paperwork can be faxed in to: 303.639.4611. \*\*Please return paperwork by May 4th!\*\*](#)

Glendale TRY League practices will take place at Infinity Park's turf pitch, 950 S. Birch St., Glendale, Colorado from 5:00-6:30pm, Tuesdays and Thursdays. Games will take place on Saturdays, May 22-June 26 from 10:00am-1:00pm. Exceptions: May 29<sup>th</sup> – 9:00am kickoff at Infinity Park.

Questions? Contact Jenna Anderson at 303.639.4713 or [janderson@glendale.co.us](mailto:janderson@glendale.co.us).

### **Registration Information**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_

Parent: \_\_\_\_\_

Shirt Size: Youth\_\_\_\_OR Adult\_\_\_\_\_ Short Size: Youth\_\_\_\_OR Adult\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

School: \_\_\_\_\_ Other Sports: \_\_\_\_\_

Medical Conditions that the staff should be aware of: \_\_\_\_\_

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### **TEAMS THIS SEASON – must be exact age**

between May 11-June 26.

Ex: Child turning 8 on July 5th will play on U7 squad.

U7 coed touch – ages 5,6,7

U9 coed touch – ages 8,9

U9 boys tackle – ages 8,9

U11 coed touch – ages 10,11

U11 boys tackle – ages 10,11

U13 girls tackle – ages 12,13

U13 boys tackle – ages 12,13

U15 girls tackle – ages 14,15

U15 boys tackle – ages 14,15

U17 girls HS tackle [Fall '10 juniors & seniors (no graduated seniors)]

### **Participation Agreement**

The Undersigned understand that Rugby Football is a physical sport with the possibility of injury. With that knowledge, the Undersigned hereby accept the risks that accompany participation in Rugby Football. The Undersigned agree that they will not hold the City of Glendale, the Glendale Rugby Football Club or any of its coaches, administrators, officials, staff, representatives, employees, insurers, or re-insurers liable for any and all claims including, but not limited to, injury, sickness, disability, paralysis, or death; that may result from participation in the sport of rugby or from participation in the Glendale Rugby Football Club and its TRY League Glendale team.

RELEASE AND WAIVER OF LIABILITY: IN CONSIDERATION OF THE PLAYER'S RIGHT TO PARTICIPATE, THE UNDERSIGNED HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the City of Glendale, the Glendale Rugby Football Club or any of its coaches, administrators, officials, staff, representatives, employees, insurers, or re-insurers for any and all claims including, but not limited to, injury, sickness, disability, paralysis, or death; that may result from participation in the sport of rugby or from participation in the Glendale Rugby Football Club and its TRY League Glendale team.

THE UNDERSIGNED AGREE THAT THIS RELEASE IS BINDING AND EFFECTIVE AS TO THEMSELVES AS WELL AS TO THEIR PERSONAL REPRESENTATIVES, ESTATES, ASSIGNS, HEIRS, AND NEXT OF KIN AND THAT IT APPLIES TO ANY AND ALL LOSS OR DAMAGE INCLUDING, BUT NOT LIMITED TO, INJURY, DISABILITY OR DEATH.

I give permission for the coaches and/or organizers of the Glendale Rugby Football Club Youth Programs to act as a guardian to my child in the case that my child is in need of medical assistance and I can not be reached.

The Undersigned understand that by signing this release they are giving up substantial rights they would otherwise have to recover damages for losses and they agree that they are doing so voluntarily and without inducement, threat, or duress. The Undersigned agree that they had the opportunity to seek legal advice before signing this release and have either done so, or have voluntarily elected not to and waive this opportunity.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Glendale Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Glendale Rugby Football Club Youth Medical Release Form

Hospitals often can not treat or care for children without consent from parents or legal guardians. Complete this form in the event your child must be attended to by medical personnel and you can not be immediately contacted to obtain consent.

### Consent to Medical Care and Treatment of Minor Children

I, \_\_\_\_\_, the natural parent or legal guardian of (minor child) \_\_\_\_\_ authorize and consent to medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician or hospital when deemed immediately necessary or advisable by the physician to safeguard my child's health and I can not be contacted. I wave my right of informed consent to medical treatment.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_

### Athlete Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medications: \_\_\_\_\_

Date of last tetanus: \_\_\_\_\_ Other Pertinent Data: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Mother's Phone: \_\_\_\_\_ Father's Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Group #: \_\_\_\_\_ Membership #: \_\_\_\_\_

Employer: \_\_\_\_\_