

North Bay Rugby Club

Permission, Medical Authorization and Waiver

Child's Name: _____

Permission to play rugby. My child is in good health and has my permission to play rugby with the North Bay Rugby Club, including participating in practices and scrimmages and playing in home and away matches, tournaments and tours, and participating in social events. My child also has my permission to travel to and from such activities with the club and to stay in accommodations selected by the club.

I understand my child is required to abide by the rules and other requirements of the club during these activities and that if he violates these rules or other requirements he may be sent home at my expense.

Authorization for medical treatment. I give my permission for emergency medical and dental treatment and first aid to be administered to my child, including permission for any hospital or other medical treatment facility to administer emergency treatment to my child for any illness or injury resulting from or occurring during participation in any North Bay Rugby Club activity.

Acknowledgement that rugby is a dangerous sport, waiver and release from liability. I understand that rugby is a full contact sport and that participation in rugby is inherently dangerous and may result in serious injury or death. I also understand that rugby is played with only minimal protective equipment and that mouth guards may not prevent such results.

I accept and assume these risks on behalf of myself and my child and in consideration for the privilege of participation in North Bay Rugby Club activities I release the North Bay Rugby Club, its directors, officers, employees, coaches, trainers, members and volunteers from any liability for any loss, damage, injury or death arising from or related to my child's participation in any North Bay Rugby Club activities, including any such loss, damage, injury or death caused by the negligence of any such party, and agree to defend, indemnify, and hold harmless all such parties from same. I agree that the intent of this final paragraph is to release and indemnify the North Bay Rugby Club and its directors, officers, employees, coaches, trainers, members and volunteers to the same extent as set forth in the release and indemnity in favor of USA Rugby in the Participation Agreement and Waiver and Release of Liability signed by me or my spouse for the current rugby season.

I am the parent or legal guardian of my child and I have legal responsibility for my child. I understand this letter will be binding on my child, my spouse and other family members.

Date: _____

Printed Name: _____

Signature: _____

Medical Insurance Information for Child

Medical Insurance Provider: _____

Group Number: _____

Individual ID Number: _____

