

Massachusetts Youth Rugby Organization, Inc.

MEMBERSHIP APPLICATION

Type: New Renewal Emerging CIPP#: _____ Date: _____

Annual Membership Dues: \$200.00 payable with application.

Use this form for clubs and teams, not for individuals;
Emerging clubs/teams first year programs pay only \$100.00 the first year.

ADMINISTRATIVE CONTACT INFORMATION

Name of Club/School/Other:

Authorizing official or Executive Contact Name:

Title:

Address:

City:

State:

ZIP:

Phone:

Fax:

E-mail:

TEAM INFORMATION

Date/Year established:

Tax exempt 501(c)3 Yes No Don't know

Public School team:

Varsity Club

Private School team:

Varsity Club

Club team:

Club

Other:

Youth u19 Boys

DI-A HS DI-B HS

DI-Club Not Sure

Youth u19 Girls

DI-A HS DI-B HS

DI-Club Not Sure

Youth u14 (*Free)

Rookie Rugby (*Free)

*Must submit application for processing only, no fees

Other:

Colors- Jersey:

Socks:

Shorts:

Total Number of CIPP players:

How many of those CIPP players played last year:

Team Season Record prior year: Won _____ Lost _____ Tie _____ Not applicable

In what Division did the team play last season? DI-A HS DI-B HS DI-Club Not Sure Not applicable
Comments:

In the past two seasons, did the team compete for a rugby championship? Yes No
If yes, what division or championship?

Additional Team Comments:

DESCRIBE THE COMPOSITION AND SKILLS LEVEL OF THIS TEAM:

- A novice, team, composed of players just learning how to play the game of rugby.
- A team mostly composed of players with below average rugby skills and understanding of the game of rugby.
- A team composed of players with average rugby skills that understand the basics of the game of rugby.
- A team composed of players with above-average rugby skills that understand the game of rugby.
- A team with one player displaying superior rugby skills.
- A team with two or more players displaying superior rugby skills.
- Older Age Team Mix Age Team Younger Age Team

Comments:

A team primarily: small in stature limited height or size very little speed

average height, size, speed above average height, size, speed

Comments:

PLAYER ATTRIBUTES

In the past two years, did any player compete as a member of an NRU team? Yes No
If yes, list the number of players who competed:

Comments:

COACH CONTACT INFORMATION

Contact Name:

Title: _____ CIPP#: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

E-mail: _____

List any coaching credentials:
 USAR Level I USAR Level II Other: _____ None currently
 Contact me for future CDP

ASSISTANT COACH INFORMATION

Name: _____

Title: _____ CIPP#: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

E-mail: _____

Other: _____

List any coaching credentials:
 USAR Level I USAR Level II Other: _____ None currently
 Contact me for future CDP

COACH/COORDINATOR DIVISION PLACEMENT RECOMMENDATIONS: SELF EVALUATION

Recommendation by the Coach Division: DI-A HS DI-B HS DI-Club Not Sure Non-Contact

Recommendation of the Coordinator or other person if applicable by: _____

Division: DI-A HS DI-B HS DI-Club Not Sure Non-Contact

Comments: _____

SIGNATURE

Signature of applicant: _____

Print: _____

Title: _____

Date: _____

Office Use Only:

Date received: _____

Date reviewed: _____

Date approved: _____

Date replied: _____

Approved by: _____

Print name: _____

Signature: _____

Title: _____