



# 2007 Participant Enrollment Application 2007 USA Rugby Membership Services

2500 Arapahoe Ave., Suite 200, Boulder, CO 80302

Fax: 303-302-0239

National Office: 303-539-0300 Website: www.usarugby.org

To avoid the processing \$1.50 fee, register online at <https://register.usarugby.org>

## ENROLLMENT INFORMATION – PLEASE PRINT LEGIBLY

Previously Registered with USA Rugby – CIPP # \_\_\_\_\_  New Participant for 2007

Club Name (Full Official Name): \_\_\_\_\_ Club ID (if known); \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Gender:  Male  Female

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

E-mail address: \_\_\_\_\_@\_\_\_\_\_ (USA Rugby correspondence only.)

Registration Type (Check all that apply):  Player  Referee  Administrator

NOTE: Coaches must use the separate Coach Enrollment Form and/or Dual Role registration Form.

## ENROLLMENT CLASSIFICATION AND ANNUAL FEES – CHECK ONE ONLY

**Club** – Affiliated with a senior men’s or women’s club or referee society ....\$35.00 \$ \_\_\_\_\_

**At-Large** – Independent player or non-affiliated administrator .....\$35.00 \$ \_\_\_\_\_

**Collegiate** - Affiliated with a collegiate men’s or women’s team .....\$30.00 \$ \_\_\_\_\_

**High School** - Affiliated with a high school team .....\$20.00 \$ \_\_\_\_\_

**Youth** - Affiliated with a youth team .....\$10.00 \$ \_\_\_\_\_

**Donation (Thank You!)** .....\$ \_\_\_\_\_

Processing fee ..... \$ 1.50  
All applications sent to USA Rugby for processing require a \$1.50 processing fee.

TOTAL INDIVIDUAL ENROLLMENT FEES ..... \$ \_\_\_\_\_

## METHOD OF PAYMENT

Club Check  Personal Check  Check Number # \_\_\_\_\_  Invoice (include Request for Invoice Form)

Visa  MasterCard Name as it appears on credit card: \_\_\_\_\_

Zip code of billing address for card holder: \_\_\_\_\_ - \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expires \_\_\_\_/\_\_\_\_

Please write number clearly

## SIGNATURE – Your application will not be processed without a signature.

I hereby affirm that the above information is true and correct, and that I have read and agree to the terms of the waiver on back of this form.

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

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(if under 18 years old)

**Incomplete or unsigned forms cannot be processed.**  
**Send signed original form to USA Rugby - Retain a photocopy for your records.**  
**Please allow 3-4 weeks for processing.**