2022/23 CLUB/ACADEMY APPLICATION FORM

17 Year Old Player in Adult Club Rugby (Male) CLUB PLAYERS ONLY COMPLETED FORM TO BE EMAILED TO ayrtpr@sru.org.uk ALL SECTIONS OF THE FORM ARE COMPULSORY

For safety and to allow young players to develop in the best environment within clubs and schools, they should be training and competing with others of the same age and physical maturity. However, in exceptional cases a player may be given dispensation to participate in rugby (training and playing) at a level above their true age grade. Any dispensation, if granted, is only valid for one season, and only allows player to play up in a specific team.

A player 17 years of age wishing to participate in adult must apply for approval from Scottish Rugby prior to participation in adult rugby. The player may not play or train in senior rugby (XVs, 10s or 7s) until Scottish Rugby approval has been received.

In addition to applying for dispensation to play in adult rugby, should the player wish to train and play in the front row an application should be submitted to seek approval for the player to play in the front row.

EACH APPLICATION IS ASSESSED ON A CASE BY CASE BASIS AND CAN TAKE UP TO 1 MONTH TO COMPLETE, DEPENDING ON INDIVIDUAL CIRCUMSTANCES. PLEASE TAKE THIS INTO CONSIDERATION WHEN SUBMITTING THIS APPLICATION.

PLAYER INFORMATION (Please complete all fields, print clearly and tick as appropriate)					
Name:		S	SCRUMS ID:		
Date of Birth:	Weigh	t:	kg Height: cm		
Club/Academy:					
Competition:	Playing Position:				
Dispensation to play adult rugby last season:	Yes	No	(Non-attachment of certificate can delay application)		
World Rugby Online RugbyReady certificate attach	ned: Yes	No	Player to sign on page 2.		

REASON FOR APPLICATION (TO BE COMPLETED BY COACH) Please answer all questions to support the reasons for this application		
How approval would assist in this player's rugby development?		
How the introduction to the senior game will be managed?		
How much U18 rugby has the player played, last season/this season?		
Is the player on an S&C programme?		
How many gym sessions does he do on average per week?		
Any other relevant information		



IF IN DOUBT, SIT THEM OUT.

COACH TO ASSESS THE PLAYER AGAINST THE FOLLOWING CONSIDERATIONS.

If the answer is NO to any of these considerations, then the player shall NOT be considered capable of competing safely with players in the proposed game/competition (with the exception of the last point).

Physical Development	In your opinion does the player's level of physical development allow him to safely compete in the proposed game/competition?		No
Skill Level	In your opinion is the player's skill level comparable with other players in the proposed game/competition (including skills specific to their playing position and in relation to the game's fundamentals e.g. tackle, pass, ruck, maul, scrum etc)?	competition (including skills specific to their playing	
Level of Experience	In your opinion does the player have the experience to compete with other players in the senior rugby competition? The following factors should be considered – representative/ pathway rugby; performance within his age group and; has the player trained with senior players in a controlled environment?	Yes	No
Standard of Competition	In your opinion is the standard of competition in the proposed game/competition suitable to allow the player to compete safely?	Yes	No
Medical/injury history	Does the player have any history of serious injury while taking part in rugby? If yes, please give brief details.	Yes	No
Serious injury details:			

PLAYER DECLARATION

I have read and understood the U18 in Senior Rugby policy, have undergone the pre-application assessments, and completed the World Rugby online Rugby Ready course.

I believe that my physical development, skill level experience and medical condition are of a sufficient level that I am capable of competing safely with players in the proposed game/competition.

I understand that I will be competing against older players and this may involve an increased level of injury risk.

I am not aware of any medical reason why my application to move into senior rugby may not be safely approved.

The personal data submitted when completing this form will be processed by Scottish Rugby Union Limited in accordance with its Privacy Policy (available at https://www.scottishrugby.org/privacy-policy)

Please note that the following types of signature on this document will be accepted: scanned/cut and pasted/handwritten/ verifiable electronic signature. A typed name will not be accepted. Only one signature box requires completion.

Signature:	OR	Electronic Signature
Print Name:		Date:



COACH DECLARATION

(Please complete all fields, print clearly and tick as appropriate)

This is the person who oversees the pre-application assessment.

Did the player meet the pre-application criteria? YES

I have read and understood the Under-18 Player in Senior Rugby policy, and completed the online RugbyRight course.

In my opinion, the player's physical maturity, skill level, experience and medical condition are of a sufficient level that he is capable of training and competing safely with players in the proposed senior rugby competition.

NO

I have explained to the player and their parent(s) or guardian(s) that the player will be competing against older players and this may involve an increased level of injury risk.

Name:	SCRUMS	ID:	
Email:			
Telephone:			
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Signature:	OR	Electronic Signature:	
Print Name:		Date:	

CLUB PRESIDENT (OR OTHER RELEVANT CLUB OFFICE BEARER) DECLARATION

Please make sure that you are familiar and agree with the following:

- I have been provided with a copy of Scottish Rugby's Under-18 Players in Senior Rugby policy
- The coach has explained to me that, in his/her opinion, the player's physical development, skill level experience and medical condition are sufficiently high that he is capable of competing safely with players in senior rugby;
- I am aware of the additional considerations for front row players;
- It has been explained to me that the risk of injury may be increased by the player playing in the proposed senior rugby competition;
- I understand that rugby is a contact sport and, like all contact sports, players are exposed to risk of injury. I also understand that the level of risk may be heightened where a player participates in senior rugby in circumstances where the player's physical development, skill level and experience are inferior to that of the players he will play against.

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Signature:	OR	Electronic Signature:
Print Name:		Date:

PARENT/LEGAL GUARDIAN

Please make sure that you are familiar and agree with the following:

- I am a parent or legal guardian of the above-mentioned player;
- I have been provided with a copy of Scottish Rugby's Under-18 Players in Senior Rugby policy;
- The coach has explained to me that in his/her opinion, the player's physical development, skill level experience and medical condition are sufficiently high that he is capable of competing safely with players in senior rugby;
- I am aware of the additional considerations for front row players;
- It has been explained to me that the risk of injury may be increased by the player competing in the proposed senior rugby competition;
- I understand that rugby is a contact sport and, like all contact sports, players are exposed to risk of injury. I also understand that the level of risk may be heightened where a player participates in senior rugby in circumstances where the player's physical development, skill level and experience are inferior to that of the players he will play against.

NO PARENT/GUARDIAN SIGNATURE REQUIRED



IF IN DOUBT, SIT THEM OUT.

SCOTTISH RUGBY DECLARATION (Office Use Only) I confirm that: a) The information submitted above complies with Scottish Rugby's Under-18 Player in Senior Rugby policy. b) The player has been deemed capable of playing senior rugby by the relevant regional panel. Please note that the following types of signature on this document will be accepted: scanned/cut and pasted/handwritten/verifiable electronic signature. A typed name will not be accepted. Only one signature box requires completion. Signature: Print Name: Date:

