

SRU Adult Rugby Dispensation Request Form

This guideline aims to protect the safety and welfare of Age Grade Rugby Players wishing to play Adult Rugby at all levels of domestic competitions in Singapore, by trying to ensure that participants with broadly compatible physical development and skill levels play with and against each other.

Dispensation is required for the following 3 groups of players:

- 17YO players can play Adult Rugby but strictly **NOT** in the FRONT ROW
- 18YO players wishing to play Adult Rugby, specifically in the FRONT ROW
- 16-year-old players are **NOT** allowed to train or play in Adult Rugby

Age of player is deemed as age as at a specific date stipulated in the Competition Manual for a specific competition

All screening/s MUST be completed before a chosen player begins rugby training above his or her age grade.

Dispensation documentation is separated into 4 Parts:

- Part 1: Adult Rugby Dispensation Consent Form (Player/Parent/Guardian)
- Part 2: Adult Rugby Coach Assessment Report (Coach) Form 2a: 17YO not playing in Front Row;
 - o Or Form 2b: 18YO playing in Front Row
- Part 3: SRU Medical Assessment Form (Doctor)
- Part 4: SRU approval (Union)



Part 1

SRU ADULT RUGBY DISPENSATION CONSEN	T FORM
17YO to play ADULT RUGBY, not in FRONT RO18YO to play ADULT RUGBY, specifically in th	
AGE AS OF:	
The following information must be submitted to Singapore Rugby	Union
PLAYER INFORMATION	
PLAYERS FULL NAME: (AS PER NRIC / PASSPORT)	TEAM/CLUB:
PLAYERS POSITION:	DATE OF BIRTH:
PLAYER AGREEMENT	
l agree to play Adult Rugby, and accept any associated risk of playing with Adults who r	nay be stronger and more physically developed than me.
PLAYERS FULL NAME	PLAYERS SIGNATURE
PARENT/GUARDIAN	
l agree that my child named above may play Adult Rugby, with Adults who may be str with the Medical Practitioner and have been informed of the risks and accept respoi competition.	

PARENT OR LEGAL GUARDIAN SIGNATURE

PARENT / LEGAL GUARDIANS FULL NAME & CONTACT NUMBER



Part 2 - Form 2a

SRU ADULT RUGBY COACH ASSESSMENT REPORT



17YO to play ADULT RUGBY, not in FRONT ROW

The following information must be submitted to Singapore Rugby Union

PLAYER INFORMATION		
PLAYERS FULL NAME: (AS PER NRIC / PASSPORT)	TEAM/CLUB:	
PLAYERS POSITION:	DATE OF BIRTH:	

Player to fill in:

How Long have you been playing for?	
Highest level of rugby played?	
Have you received specialist coaching in the past 2 years?	YES / NO
I understand the risks associated with playing Adult Rugby	YES / NO

Coach to fill in:

You have the required experience to approve this application for dispensation?	YES / NO
The player has correct attributes to safely play at this level?	YES / NO
The player has sufficient training to safely play at this level?	YES / NO
You approve this player to play Adult Rugby for your club/team?	YES / NO

TEAM COACH		
In regard to this player whom I know, I agree as Coach, with an appropriate understanding of the physical attributes required of,		
and the risks to play Adult Rugby, that this player has the requisite skills and experience to play Adult Rugby. I confirm I have submitted the necessary relevant information to the SRU Technical Director.		
TEAM COACH FULL NAME	TEAM COACH SIGNATURE	



Part 2 - Form 2b

SRU ADULT RUGBY COACH ASSESSMENT REPORT 18YO to play ADULT RUGBY, in the FRONT ROW

The following information must be submitted to Singapore Rugby Union	
PLAYER INFORMATION	
PLAYERS FULL NAME: (AS PER NRIC / PASSPORT)	TEAM/CLUB:
PLAYERS POSITION:	DATE OF BIRTH:
Player to fill in:	
How Long have you been playing for?	
Highest level of rugby played?	
Have you received specialist Front Row coaching in the past 2 years?	YES / NO
Did you play in the FR last year?	YES / NO
Have you been injured from playing in the Front Row?	YES / NO
I understand the risks associated with playing Adult Rugby in the Front Row	YES / NO
Coach to fill in:	
You have the required experience to approve this application for dispensation?	YES / NO
The player has correct attributes to safely play at this level?	YES / NO
The player has sufficient training to safely play at this level?	YES / NO
You approve this player to play Adult Rugby for your club/team?	YES / NO
TEAM COACH	
In regard to this player whom I know, I agree as Coach, with an appropriate required of, and the risks to play Adult Rugby, that this player has the recurrence submitted the necessary relevant information to the SRU Technical Direction.	quisite skills and experience to play Adult Rugby. I confirm I have
TEAM COACH FULL NAME	TEAM COACH SIGNATURE



Part 3 – Additional Form

Please download SRU Medical Assessment Form



Part 4 – Additional Form

SRU Checklist:

Items	Yes	No
Has the player and parent/guardian signed the written consent form to play adult rugby?		
(Part 1)		
Does the player have the SRU Adult Rugby Coach Assessment report to play adult rugby?		
(Part 2)		
The player has completed SRU Medical Assessment Form and has approval from a		
physician understanding the demands of Adult Rugby? (Part 3 – Additional		
Form)		
Has the parent/ guardian been informed and counselled on the risk of playing adult rugby?		
(Part 3 – Additional Form)		

Singapore Rugby Union		
In regard to this player, I agree as SRU Technical Director, with an appropriate the risks to play Adult Rugby, that this player has the requisite skills and expensessary information from the team coach.	• , ,	

TECHNICAL DIRECTOR SIGNATURE

TECHNICAL DIRECTOR FULL NAME