



NEW ZEALAND RUGBY LEAGUE INC TEAM CONTRACTUAL FORM.....SEASON



We, the undersigned, make application to be registered as a contracted player with _____ Rugby League Club, and agree to abide by the constitutions of the NZRL, the Zone, the District League and all rules and by-laws of the above Club in their entirety and to observe all directions or additional rules, if any, and financial arrangements for players which may from time to time be made by the said Club, District League, Zone or NZRL. I agree to carry out all reasonable requirements of the Club, District League, Zone and NZRL and to play at all times to the best of my ability.

NOTE – IT IS IMPORTANT THAT ALL COLUMNS BE FILLED IN COMPLETELY AND CORRECTLY

CLUB & GRADE:				
	Surname (Last Name)	First Name	Date of Birth	Signature
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It is important that all columns be filled out correctly. The information on this form is used by the NZRL (Inc.) at Rugby League House, 7 Beasley Avenue, Penrose, Auckland to register Senior and junior players both male and female. This information may also be disclosed to NZRL's family of sponsors.

TEAM DETAILS AND TEAM MANAGEMENT INFORMATION

Position	Full Name	Email Address	Mobile	Qualifications
COACH				
ASST COACH				
MANAGER				
TRAINER				

The Club Agrees:

1. To reimburse added players with any mutually agreed expenses.
2. To pay injury compensation in accordance with the Club's usual practice from time to time, decided upon by the Committee of the Club and to claim on the player's behalf to the District League, or the N.Z.R.L. (Inc.) for any compensation payable in accordance with insurance schemes currently conducted by them.
3. To provide the usual facilities for training and playing the game of Rugby League.
4. The Club verifies that all of the players listed on this document are eligible to play in this team and for this club and have received the appropriate clearance or transfer where required.

SIGNED CLUB SECRETARY: _____ **DATE:** _____

DISTRICT LEAGUE ENDORSEMENT

SECRETARY NAME: _____ **SIGNATURE:** _____ **DATE:** _____