

PART 1 – GENERAL
Name of proposed Club:
Name of proposed Club:
Variation(s) of Bughy within slub
Variation(s) of Rugby within club
Name of Person & position completing form:
Postal Address of Club:
E-mail address(es) for club communications:
Date of application:

Please be aware; as per Statute 2.1 Membership of OR, the criteria for an application to be successful:

- 1.1.1. Application by a club Each application by a club applying for membership of the ORC must satisfy the following criteria:
  - (a) Have a constitution: the club has a written constitution acceptable by the ORC containing the provision that one of the main objects of the club is the playing of rugby in accordance with the specific variations Laws of the Game, (World Rugby), Rules Handbook (Federation of International Touch) and any other such entity dependant on alternative variation. The constitution must also refer to the regulations relating to the Game as stated by the ORC.
  - (b) A training schedule,
  - (c) A registration system,
  - (d) Not be considered in bad standing, legal or local,
  - (e) Must play a variation of rugby that is found in the Sultanate of Oman,
  - (f) Have or working towards a club/sport development plan,
  - (g) Follow the current prescribed requirements for membership and sport development,
  - (h) Fulfil the requirements of qualified individuals and safety measures to ensure the integrity of the sport.



## PART 2 – ATTACHMENTS & KEY PERSONNEL

- Copy of Constitution: Please Attach & confirm name Doc 1
- Copy of Certificate of Incorporation (if applicable): Please Attach Doc 2
- Copy of current Sport Development Plan: Please Attach Doc 3
- Do you have Liability Insurance or rely on other Parties: Please Comment/attach as applicable Doc 4
- Copy(ies) of EAP & Risk assessments: Please Attach Doc 5/6

Club Officials and their Contact details: Please fill out

Name	Position in club	Email Address/Contact details



## **PART 3 – STATISTICAL INFORMATION**

umber of Current Players:		
mber of Teams: (detail)		
mber of Qualified Coaches, Details		
Name	Qualification	Rugby Variation
ımber of Qualified Match Officials, De		
Name	Qualification	Rugby Variation
umber of Qualified First Aiders, Details	5	
Name	Qualification	Medical Profession (yes/no)



## **PART 4 SPORT DEVELOPMENT**

Please give a brief description of how you are looking to develop our sport in the next few years.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			
Please add anything else you feel relevant to this application.			

Thank you for filling out this form, we will respond with our decision as quickly as possible. Good luck.