BELGIUM RUGBY

Federation Belge de Rugby
Ransbeekstraat 227 1120 Brussel
BTW/TVA/VAT: BE0409.553.202

infofbrb@rugby.be

DUAL REGISTRATION FORM

Application for registration with a second national union

1 Player information

NAME (PLEASE PRINT)

DATE OF BIRTH (dd/mm/yyyy)

Grounds for dual registration (1): ☐ Full-time student ☐ Armed services

CURRENT POSTAL ADDRESS

TELEPHONE / MOBILE

E-MAIL

FBRB PLAYER REG. NO.

CURRENT UNION (2)

NAME OF CURRENT CLUB

PROPOSED SECOND NATIONAL UNION (2)

CLUB IN SECOND UNION

ADDRESS IN SECOND UNION

TELEPHONE / MOBILE

COMMENCEMENT DATE

END DATE (3)

(1) The applicant must be either a full-time student or a full-time member of the armed services. (2) The current union (e.g. FBRB) will remain the player's primary union; the other union will be the player's second union. (3) The dual registration can remain in place for a maximum of 12 months. A further application will be required after this.

2 Player declaration

I, (FULL NAME)

CURRENTLY RESIDING AT

declare that I have had the opportunity to read and will abide by the Regulations Relating to the Game, as approved by World Rugby, and that the above information is correct in all particulars.

DATE OF SIGNATURE (dd/mm/yyyy)

PLAYER'S SIGNATURE

3 Declaration on behalf of current club

The applicant is in good standing with this club and has no outstanding obligations to the club under the terms of any contract/written agreement or any financial debt to the club which would prevent approval of this application.

FOR AND ON BEHALF OF (NAME OF CLUB/BODY)

NAME (PRINT)

POSITION IN CLUB

DATE OF SIGNATURE

SIGNATURE

Declaration on behalf of the current union and approval of request

FOR OFFICIAL USE ONLY

The applicant is under no playing suspension within the jurisdiction of this union and approval is hereby given for dual registration.

FOR AND ON BEHALF OF THE CURRENT UNION

DATE (dd/mm/yyyy)

NAME

SIGNATURE

UNION STAMP OR SEAL

Declaration on behalf of the second union and approval of request

FOR OFFICIAL USE ONLY

The applicant is under no playing suspension within the jurisdiction of this union and approval is hereby given for dual registration.

FOR AND ON BEHALF OF THE SECOND UNION

DATE (dd/mm/yyyy)

NAME

SIGNATURE

UNION STAMP OR SEAL

Return the completed form

Please return the completed form to Belgium Rugby by e-mail: clearance@rugby.be