



# New Zealand Rugby REFEREE 2016 NEW REGISTRATION

[www.communityrugby.co.nz](http://www.communityrugby.co.nz) - Home of New Zealand Community Rugby

**IMPORTANT: YOU MUST COMPLETE ALL SECTIONS OF THE FORM AS ACCURATELY AS POSSIBLE.** By completing this form you are covered under the New Zealand Rugby indemnity insurance scheme. The data gathered from this form allows your Provincial Union and New Zealand Rugby to better manage the game.

**Which rugby organisations would you like to receive commercial emails from? For example, emails about priority access to test tickets or goods and services from sponsors** (please tick)

New Zealand Rugby    
  Provincial Union    
  Super Rugby Franchise

**ASSOCIATION YOU ARE A MEMBER OF IN 2016:**

**Association last registered to:**

(if applicable)

**Gender:** (please tick)    
  Male    
  Female

**Ethnicity:** (please tick one only)    
  Maori    
  NZ European    
  Asian    
  Pacific Islander    
  Other

**First Name:**

**Middle Name:**

**Last Name:**

**Date of Birth:**  /  /  (Date of Birth is IMPORTANT to prevent duplicate entries on the database)

**Telephone (H):**

**Mobile:**

**Email:**

**Street Address:**

**Suburb:**

**Town/City:**

**Post Code:**

**Your Occupation:**

**I am an active On field referee/Assistant referee** (please tick)  Yes      No

If **YES**, are you also (please tick ONE)    
  Administrator    
  Referee Coach

If **NO**, what is your primary function? (please tick ONE)    
  Administrator    
  Referee Coach    
  Other

I understand that by signing this form, I am agreeing to be bound by the constitution, regulations, bylaws and policies of the above Provincial Union and that I am also bound by the New Zealand Rugby Rules and Regulations by virtue of being deemed to be a 'person' as defined in those regulations. If you will only be refereeing players aged 12 and under, please refer to the letter provided at your Rugby Smart course and complete the NZ Police Vetting Consent Form over the page.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Pursuant to the Privacy Act the following is brought to your attention. The New Zealand Rugby Union ("NZRU") uses this form to collect personal information for the purposes of (i) the general administration of the game of rugby, including statistical analysis and injury insurance and research, and (ii) the promotion of the game of rugby, including the marketing to rugby members by sponsors of the game of rugby. The information will be held by the rugby organisation that you play for and/or the Provincial Union that such organisation is affiliated to and/or the NZRU. The information may also be provided (in whole or part) to other persons for the furtherance of the purposes stated above.

In addition, coaching and performance reports may be prepared by referee coaches in respect of any games you referee. Any information contained in those reports may be used to assist in your personal development and for the training and education of referee coaches. From time to time, it may also be used for selection and appointment purposes. This information will be held on the NZRU's Referee Report Information Management System (RRIMS) and may be accessed by your respective provincial, zone and national referee administration personnel for the above purposes.

You have rights to access (and correct) such personal information as provided for in the Privacy Act. Please contact the NZRU in the first instance. Your signing of this form constitutes authorisation of the use and disclosure of the personal information in accordance with the purposes set out above. Failure to complete this form (or the provision of incorrect information) may result in your being ineligible for insurance cover arranged for rugby members by the NZRU.