



**SYDNEY ROOSTERS**  
**2020 JUNIOR REPRESENTATIVE TRIALS**  
**REGISTRATION FORM**

*Please PRINT all details clearly below.*

**PERSONAL DETAILS**

First Name	Last Name	
Address		
Suburb		Postcode
Home Phone Number	Mobile Phone Number	
Email Address	Date of Birth	
Occupation or School		Year at School (e.g. Year 11)
Height (Cm)	Weight (Kgs)	
Current Club	Rugby League District (e.g. Parramatta, Penrith, South Sydney)	

**PLAYING & REPRESENTATIVE HISTORY**

2019
2018

**PREFERRED PLAYING POSITIONS**

1st preference	2nd preference	3rd preference
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I acknowledge that the Sydney Roosters Rugby League Football Club accepts no liability for injuries sustained during Open and/or Invited Trial matches.

Signature	Date
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**STAFF USE ONLY**

Development Fee?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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