MANAWATU RUGBY

MRU Representative Team Player Nomination Form

SCHOOLGIRLS

Club/School: _____

Contact Person: _____

Contact Phone Number: _____

Players must be a registered Secondary School student

Name	Position	Grade and team

Return forms by Friday 28th May to:

Community Rugby Manager
Manawatu Rugby
PO Box 1729
Palmerston North
Fax: (06) 354 1670
Email: info@manawaturugby.co.nz