

# College Rugby Tryout Registration

First Name	<input type="text"/>
Last Name	<input type="text"/>
Date of Birth	<input type="text"/>
Student ID	<input type="text"/>
Email	<input type="text"/>
Phone Number	<input type="text"/>
Preferred Position	<input type="text"/>
Height (cm)	<input type="text"/>
Weight (kg)	<input type="text"/>
Rugby Experience	<input type="text"/>
Medical Conditions	<input type="text"/>
Additional Notes	<input type="text"/>