

# Dungannon Rugby Club Summer Camp Application Form

**Please complete all fields.**

Surname \_\_\_\_\_ First name(s) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

School/Rugby Club \_\_\_\_\_ Shirt Size S / M / L / XL \_\_\_\_\_

Any Medical Conditions we need to be aware of? (Please circle) Yes / No

If yes please state details \_\_\_\_\_

\_\_\_\_\_

Please list any Medication/treatment your child is taking

\_\_\_\_\_

## Parent/Guardian Information

Name \_\_\_\_\_ Email \_\_\_\_\_

**Emergency Contact Number** \_\_\_\_\_

I Hereby give permission for my child to participate in the Dungannon rugby summer camp at Dungannon RFC from the 7th – 9th July 2010.

**Parent/Guardian Signature** \_\_\_\_\_

Do you consent to Dungannon Rugby Club or its agents photographing your child's involvement in Dungannon Rugby's Summer Camp? (Please Circle) Yes / No

Details of the camp will be posted on [www.dungannonrugby.co.uk/summercamp](http://www.dungannonrugby.co.uk/summercamp)

Please address cheque to: 'Dungannon Storm Rugby Summer Camp'

Please post cheque to:

Dungannon Rugby Football Club,

Stevenson Park,

Dungannon,

BT71 7DS.

**Please contact Mark on 07749104558 or Scott on 07811187314 for details on discounts regarding family groups.**