

WESTCOMBE PARK SUMMER RUGBY CAMPS 2017

SUMMER CAMP REGISTRATION FORM

NAME: DOB

ADDRESS:

.....

TEL: (HOME)

(MOB)

EMAIL:

CONTACT NAME AND NUMBER IN CASE OF EMERGENCY:

.....

ANY KNOWN MEDICAL CONDITIONS:

.....

CLUB: SCHOOL: AGE GROUP:

CAMP ATTENDING (please tick and circle days attending):

Please note these age groups are the ones you'll be playing in next season

JULY 31st – August 4th CAMP U7 – U14 – 31st, 1st, 2nd, 3rd, 4th

AUGUST 21st – 25th CAMP U7 – U14 – 21st, 22nd, 23rd, 24th, 25th

COSTS:

£30 PER DAY OR £120 IF ATTENDING ALL 5 DAYS

I UNDERSTAND THAT ALL APPLICATIONS ARE NON REFUNDABLE

SIGNED: DATE:

RELATIONSHIP:

PLEASE RETURN THE COMPLETED FORM WITH A CHEQUE PAYABLE TO "J.CATLIN" TO JAMES CATLIN, WESTCOMBE PARK RFC, GODDINGTON DENE, GODDINGTON LANE, ORPINGTON, KENT, BR6 9SX. ONCE YOUR APPLICATION HAS BEEN RECEIVED YOU WILL RECEIVE A CONFIRMATION EMAIL WITH ALL THE CAMP DETAILS.

IF YOU HAVE ANY QUERIES THEN PLEASE DON'T HESITATE TO CONTACT US AT rugbycamps@westcombeparkrugby.co.uk