

East London Basketball Camp | application form

15-17 August 2016



Name of camper:

Date of Birth:

School:

School year:

Please tell us any details of any special educational needs that the child named above has:

Please indicate any allergies the child named above has please include any medication required):

Tshirt size (please state if this is in child or adult sizing):

Name of parent/carer (must be over the age of 18):

Relationship to child named above:

Parent/carer contact number:

Emergency contact number and name if different from the named parent/carer above:

Email:

I do/do not give my permission for the child named above to leave the camp alone (please delete as appropriate)

Singed:

Dated: