

JUNIOR CAMP 2010

To be held at: Chelwood Camp Site, nr Marksbury, Bath, Avon

FRIDAY 23rd July – SUNDAY 25th July 2010

To: The Chief Instructor, South West of England T.A.G.B.		PHOTO Required
PART 1		
I wish to enrol on this years Junior Camp (All sections must be completed)		
Forenames:		
Surname:		
Date of Birth:		
Address: Inc postcode		
Telephone no.: (inc area code)		
Emergency Telephone no:		
Email Address: (Required)		
PART 2		
TAGB Licence No:		Expiry Date
Present Kup / Dan:		
T.A.G.B. School:		
Name of Instructor:		
Can You Provide A Tent?		
Size of tent:		
I am sharing with:		
PART 3		
I understand that the Camp commences on Friday 23 rd July and ends on Sunday 25 th July 2010. I hereby enclose payment of £60.00 as full payment for this camp. (All cheques should be made payable to: West of England Tae Kwon-Do).		
PART 4		
I certify that the above facts are correct. I hold myself fully responsible for any injury that I may sustain whilst taking part in this weekend camp. I further undertake to abide by the rules of this camp if I am accepted as a member. I declare that I am fit and in good health.		
NOTES		
<i>Fees paid are non-returnable under any circumstances unless medical evidence is provided.</i>		
Please note down any particular eating or medical requirements: e.g. Vegetarian or Asthmatic etc.		
Signature of Child attending:	Date	
Signature of Parent/Guardian:	Date	