Primary Sports Camp

Saturday 6th June 2015

WheelPower - British Wheelchair Sport will be hosting a Primary Sports Camp at Stoke Mandeville Stadium, Aylesbury on Saturday 6th June 2015. Entry and Payment forms are attached.

The Primary Sports Camp is open to children with physical or mild sensory impairments between the ages of six and eleven years old. We shall also welcome entry forms from those children who would not traditionally fit within ‘disability sport classification’ such as those with dyspraxia, epilepsy or some form of internal organ dysfunction or absence. The aim of this broader definition is to make some form of provision for those children who are unable to ‘fit in’ to mainstream PE/Sport Provision but who also do not qualify for disability provision.

All are welcome to attend the camp and coaches will attempt to include parents, teachers and escorts in the activities. Registration will commence at 9.15 am and participants are asked to be prompt. The Camp will end at 4 pm.

Activities will include Basketball, Boccia, Bowls, Fencing, Kurling, Swimming, Tennis, Zone Hockey and a Fun Session.

Accommodation, if required, will be available at the Olympic Lodge, Stoke Mandeville Stadium.

The entry fee is £9.00 with lunch provided. Accommodation, if required, will be available. A twin room costs £25.00 per night (based on 2 people sharing). Please indicate on your payment form if you require accommodation and please add the additional payment. Breakfast is an additional £3.00.

If you require any further information please do not hesitate to contact WheelPower – British Wheelchair Sport on 01296 395995 or e-mail [stewart.jeeves@wheelpower.org.uk](mailto:stewart.jeeves@wheelpower.org.uk). An electronic version of the form is available.

We look forward to welcoming you to the Camp.

Stewart Jeeves

Sport Development Officer

WheelPower

Entry Form

To be returned by 22nd May 2015

Please complete in block capitals and in full

**Participant Details**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title |  | Surname | |  | | | First name(s) | | |  |
| Address |  | | | | | | | | | |
|  | | | | | | Post Code | | |  | |
| Telephone | | |  | | | | | | | |
| Date of birth | | / / | | | Age | | |  | | |
| Email | |  | | | | | | | | |
| Brief description of impairment:  Please indicate if you use a manual wheelchair, power wheelchair, prosthesis or crutches:  Powered □ Manual □ Prosthesis □ Crutches □ Ambulant □ | | | | | | | | | | |

**Parent/Guardian/Personal Assistant contact details**

A responsible Parent/Guardian/Personal Assistant must accompany all participants.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title |  | | Surname |  | | First name(s) | |  |
| Address | |  | | | | | | |
|  | | | | | | Post Code | |  |
| Tel | |  | | | Mobile | |  | |
| Email | |  | | | | | | |

Children attending the Primary Sports Camp are the legal responsibility of their parents or carer and as such parents are expected to accompany their children at all times while onsite at the Primary Sports Camp. WheelPower staff, trustees and volunteers are not acting in “loco parentis” and do not take on the responsibility of looking after children.

Wheelpower greatly value your support and would like to keep you informed about future events.

Please tick the box if you do not give your permission for this

**Sport**

There will be an opportunity to swim at the camp in a fun session. Participants who wish to swim must be accompanied by a parent/guardian. Please tick the box if your child would like to swim at the Primary Sports Camp.

**Accommodation**

To be returned as soon as possible and no later than 22nd May 2015

\_\_\_ We shall not require accommodation for the Primary Sports Camp

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Arrival |  |  |  | Date of Departure |  |  |  |
|  | Day | Month | Year |  | Day | Month | Year |
| Name(s) for accommodation (please list any additional persons overleaf): | | | | | | | |
| Special Requirements: | | | | | | | |

Catering

Lunch will be provided free of charge. Breakfast is available at an extra charge (see Payment Form for details)

Dietary Requirements (including parent/guardian/carer if attending):

Medical and Photo Consent Form

PLEASE COMPLETE IN BLOCK CAPITALS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Child’s Name |  | Date of Birth | | / / |
| GP’s Name |  | Tel |  | |
| Address |  | | | |
|  | | | | |

Medical Information/Special Requirements:

Is there anything we should be aware of to ensure your well-being, such as an injury, illness, allergies (including sun cream etc.) or medical condition(s), as well as any special requirements your child may have.

YES NO

If yes please give details:

Are you allergic to penicillin? YES NO

**Medical Consent Statement:**

My child is in good health and I consider him/her capable of taking part in the Primary Sports Camp. I have provided medical information above and consent that in the event of any illness/ accident, any necessary treatment can be administered to my child, which may include the use of anaesthetics. I understand that while sports coaches and officials will take every precaution to ensure that accidents do not happen, they cannot be held responsible for any loss, damage or injury suffered by my child.

I consent to any emergency medical treatment in the event of an accident

Signed (parent/carer if under 18): .....................................................................................

Print Name: ................................................................................ Date:..............................

**Photography**

I understand WheelPower and their partners may take photographs during the event and permit them to use the images for promotional purposes, including its website.

Please tick the box if you do not give your permission for this

Please note; it is difficult to ensure an individual is not included by error in group or action shots.

Payment Form

Fees must be paid in full with the Entry Form and received by WheelPower by 22nd May 2015. Registration for the event cannot be confirmed until payment has been received. Refunds cannot be issued unless 1 week’s notice of cancellation is received prior to the start of the event unless there are exceptional circumstances.

Please note entry fee is applicable for each individual attending (including parent/guardians). E.g. if parent and participant are attending the entry fee will be £14.00.

|  |  |  |
| --- | --- | --- |
| Cost | Amount | Total |
| Accommodation in the Olympic Lodge (prices per person) | Two nights | £25.00 |  |  |
| One night | £12.50 |  |  |
| Breakfast (per meal) | £3.00 |  |  |
| Primary Games Entry Fee (prices per child, including siblings) | Saturday | £9.00 |  |  |
| Parents and siblings not taking part (this includes lunch) | Saturday | £5 |  |  |
| Overall Total |  |

\*Lunch will be provided free of charge

Payment by Cheque/Postal Order

Cheques, etc. should be made payable to WheelPower

Enclosed within this entry form for the Primary Sports Camp is a cheque for

£

## Payment by Credit Card (Visa, Visa Debit, Mastercard)

If you wish to pay by Credit Card please complete the form below in block capitals:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title |  | | Initials | | |  | | | Surname | | | |  | | | | | | | | | | | |
| Card Number | |  | |  |  | |  |  | |  | |  | |  |  | |  |  |  | |  |  |  |  |
| Valid From | |  | | | | | | | | | Expiry Date | | | | |  | | | | | | | | |
| Issue No. | |  | | | | | | | | | Security No. (last 3 digits  below magnetic strip) | | | | | | | | |  | | | | |

Please debit my account £ sterling in payment for entry and accommodation/catering for the Primary Sports Camp.

Signed …………………………………………………………. Dated………………………………………………………