



Encouraging participation and developing talent

# School Holiday Rugby Camp

## Booking form

- Players Name.....
- Players Address.....
- D.O.B.....
- School Year.....
- Club and Age Group.....
- Medical Conditions.....
- Food Allergies.....
- Parent/Guardians Name.....
- Telephone Number (include emergency).....
- Email.....

I enclose a cheque for £.....for.....day/days made payable to 'cjrugbycoachng' and return to cjrugbycoaching 62 Peel Street, Macclesfield, Cheshire, Sk11 8BL

### PHOTOGRAPHIC CONSENT

During the rugby camp a variety of photos will be taken and used for promotional purposes by cjrugbycoaching. Please sign the consent form below to allow your son/daughter to have their photo taken as part of the camp and to confirm you are happy for them to attend.

Name..... Signed..... Date.....

A confirmation letter will be sent to your email on receipt of your application form.  
All players are reminded to bring both trainers/boots, food, drink and a change of clothing.