

**SUMMER CAMP 2019 Registration Form**

**Monday 22ND FRIDAY 26TH JULY**

Please fill in **ONE FORM** per player attending the Summer Camp

**Player details:**

Player name: \_\_\_\_\_ Form: \_\_\_\_\_

Any particular medical condition/ Allergies: \_\_\_\_\_

**Parent / Guardian details:**

Primary contact email (In **CAPITALS**): \_\_\_\_\_

Emergency contact number: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

**Booking details** (please tick where appropriate):

**Full Week Camp:** £100 (22<sup>nd</sup> – 26<sup>th</sup> July)

**Daily booking:** £25 per day. Please tick day(s) required:

Monday 22<sup>nd</sup> July       Tuesday 23<sup>rd</sup> July       Wednesday 24<sup>th</sup> July       Thursday 25<sup>th</sup> July       Friday 26<sup>th</sup> July

**Total Payable:**

**Payments by sQuid:**

Payments should be made online via sQuid ([www.squidcard.com](http://www.squidcard.com)) using the same log-in for when topping up lunch cards. If the username/password has been forgotten this can be obtained by logging into sQuid and into the section entitled "sign in to my account". Once you are logged on, you will then be given the option to top up the lunch card or to pay for a trip. The trip name on sQuid is "**Rugby Summer School.00July**" Please make a payment for each of the daily bookings you have chosen **or** select "**Rugby Summer School.Week**" to pay for all 5 days.

I **have** submitted a squid payment of £\_\_\_\_\_ for the booking.

Signed: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

Although we will take reasonable steps to avoid serious injuries suffered by the participants, the participants voluntarily assume the risk of injury. By agreeing for your child to participate on the camp, you confirm that you are the parent/guarding of the child registered on this form and you consent to:

1. Your child's participation in the camp.
2. Your child being photographed or filmed which may be used for promotional material to promote the camp.
3. Any data regarding your child may be used for our record keeping purposes.
4. You consent to a first aid person caring for your child in case of an accident.
5. You accept that there is a risk of injury when involved in sport.
6. Should the medical condition change of your child after filling in this form it is your responsibility to inform the Summer Camp Team detailing the necessary information

Payments must be received within seven days after the registration form has been submitted. Booking enquires must be made to Graham Purdy using the Summer Camp email address: [summercamps@lpsb.org.uk](mailto:summercamps@lpsb.org.uk) or phoning **0208 639 4836** – enquires should receive a response within 48 hours.

**Please send completed form (and payment) to: Langley Summer Camp, Langley Park Boys School, South Eden Park Road, Beckenham, Kent, BR3 3BP**

**For administration use only:** Date received \_\_\_\_\_ Payment Method \_\_\_\_\_ Confirmation sent? Yes  No

