

I give permission for [redacted] (insert name) to take part in the Ulster Elks Juniors programme activities identified overleaf. I know of no reason, medical or otherwise why s/he should not undertake the sports and activities involved. I have completed the medical details below 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 every possible effort will be made to contact me first. I also understand that while coaches and staff will take every precaution to ensure that accidents do not happen, they cannot necessarily be held responsible for any loss, damage or injury suffered by my child. I am willing to let my child participate in any official media coverage required

I have enclosed £ [redacted] to cover the cost of Ulster Elks Juniors annual membership and the specified after school course(s). **NB** Please do not send cash. Cheques should be made payable to the University of Ulster.

Signed: [redacted] (Parent/Guardian) Date: [redacted]

**MEDICAL DETAILS (Please complete as appropriate)**

Doctor's Name: Dr [redacted] Telephone: [redacted]

Has your child had a tetanus injection in the last 10 years? Yes / No

In your child's interest it is important that we know whether s/he suffers from any illness or medical condition. Please use the following space to state, in confidence, any health or other matters concerning your child about which we should be aware e.g. Allergies. Please also indicate if your child is receiving any medication, with details and dosage and any specific dietary requirements.

[Redacted area for medical details]

**ULSTER ELKS JUNIORS MARKETING**

Please tell us how / where you heard about the ULSTER ELKS JUNIORS programme:

- Direct Mail  Local Press   
Friend / Family Member  University Web Site

Other (Please specify) [redacted]

Completed application forms should be returned with the appropriate payment to:

Gary Wallace  
Sport Development Officer  
Coleraine Sport Centre  
University of Ulster,  
Cromore Road  
Coleraine  
BT52 1SA

Tel: (028)703 23263  
Email: g.wallace@ulster.ac.uk  
www.sportsulster.com



# Coleraine Sports Centre



## ULSTER ELKS JUNIORS

### Easter Camps and After Schools Sports Clubs

March – June 2010

FIRST CLASS FACILITIES  
FIRST CLASS COACHING  
FIRST 4 FUN



## EASTER CAMPS

SPORT ACTIVITY	AGE	TIME	VENUE	START DATE	END DATE	COST
Gaelic	5 - 16	10:00 - 15:00	Grass Pitches	1 April	2 April	£25 1st Child £20 2nd Child
Multi Skills	5 - 8	10:00 - 15:00	Sports Hall	7 April	9 April	£35 1st Child £30 2nd Child
Hockey	7-15	10:00 - 15:00	Synthetic Pitch	7 April	9 April	£35 1st Child £30 2nd Child
Soccer	8-16	10:00 - 15:00	Grass Pitches	7 April	9 April	£35 1st Child £30 2nd Child

## AFTER SCHOOLS CLUBS & COURSES

DAY	SPORT ACTIVITY	AGE	TIME	VENUE	START DATE	END DATE	COST
Monday	Multi Skills	5 - 7	16:00 - 17:00	Minor Hall	8 March	29 March	£10
Monday	Disability Tag Rugby	6 - 12	16:00 - 17:00	Main Hall	8 March	22 April	£12
Thursday	Disability Tag Rugby	6 - 12	16:00 - 17:00	Main Hall	11 March	25 March	£12
Monday	Multi Skills	5 - 7	16:00 - 17:00	Minor Hall	24 May	21 June	£12
Monday	GAA	6 - 12	16:00 - 17:00	Main Hall	24 May	21 June	£12
Thursday	Athletics	6 - 12	16:00 - 17:00	Main Hall	27 May	24 June	£12
Saturday	Hockey	7 - 12	10:00 - 11:30	Synthetic Pitch	17 April	19 June	£20

Must be an Ulster Elk Junior Member to register on the above After School Clubs

### LIMITED PLACES ON CLUBS & COURSES

**BOOK EARLY to avoid disappointment**

**10% discount on Camps to Ulster Elk Junior Members**

Plus LOADS more Camps & Courses to be confirmed for Summer & Autumn 2010

**FIRST CLASS FACILITIES - FIRST CLASS COACHING - FIRST 4 FUN**

## Application Details

Please complete one form per child.

\_\_\_\_\_ (child's name)

Would like to join the ULSTER ELKS JUNIORS and enclose an additional £10 for annual membership from September 2010 - August 2011

Sport / Activity Applying For	Start Date	Cost
_____	_____	_____
_____	_____	_____
_____	_____	_____

_____	_____	_____
_____	_____	_____
_____	_____	_____

**Sub Total** \_\_\_\_\_

**Total Including Annual Membership Fee** \_\_\_\_\_

Following initial Ulster Elks Juniors membership registration you will be issued with a membership card and number that will enable you to access future Ulster Elks Juniors sports activities, the benefits package and any additional special offers and events. Full details will be forwarded in due course. All members will also receive an Ulster Elks Juniors t-shirt.

ULSTER ELKS JUNIORS activities are open to boys and girls. All courses will be filled on a first come first served basis so apply early to avoid disappointment.

Home Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Email: \_\_\_\_\_

Home Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_

Parent / Guardian: \_\_\_\_\_

School: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Please give the names & contact telephone numbers of two people who may be contacted in case of an emergency:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Tel No: \_\_\_\_\_ (H) Tel No: \_\_\_\_\_ (H)

Tel No: \_\_\_\_\_ (M) Tel No: \_\_\_\_\_ (M)