



HOLIDAY SPORTS PROGRAMME ENROLMENT FORM

Monday 5th July at the Real Journeys Fiordland Events Centre

A sports specific, fun filled school holiday programme for children aged 5-12 years

Sport Southland and 5 regional sporting organisations have worked collectively to provide sport specific sessions in Te Anau during the school holidays for groupings of children aged 5-6, 7-9 & 10-12.

Sports in this “trial” are:

5 – 6 year olds: Fun skills, Football, Netball & Ripa Rugby

7 – 9 year olds: Squash, Football, Netball, & Ripa Rugby

10 – 12 year olds: Netball, Ripa Rugby, Squash and Football

Please complete the following information:

Name: _____ Boy / Girl

Please circle the age group of your child:

5 – 6 years old

7 – 9 years old

10 – 12 years old

Important information:

The day will be split into three sessions between 10:30am and 3pm and only costs \$10 for the day. There will be a scheduled lunch break between 11:45am and 12:15pm. Children need to bring their own lunch. Please note: this area will be supervised at all times.

Cost: \$10 per child

Children need to dress warmly and bring a rain jacket as, dependent on numbers, some activities may be held outside.

Enrolment/consent forms are available from Outside Sports, 38-40 Town Centre, Te Anau and from www.sportsouthland.co.nz

Completed enrolment/consent forms, along with payment, are to be delivered to Outside Sports, 38-40 Town Centre, Te Anau. Payment can be made by cash or cheque (cheques made payable to Sport Southland).

Please note payment must be submitted at the same time as the enrolment form by 4pm on Friday 2 July.

Please direct any enquiries to:

Peter Dunne
peter.dunne@sportsouthland.co.nz
03) 211 2150 or 0274 971 679

Tracy Simpson
tracy.simpson@sportsouthland.co.nz
03) 211 2150 or 027 636 9296



HOLIDAY SPORTS PROGRAMME Consent Form

Child's information:

Child's name:

Home address:

Home telephone number:

School attending:

Date of birth:

Age:

Male/Female:

Parent/Caregiver information:

Parent/Caregiver name:

Home address:

Home telephone number:

Mobile:

Business:

Email address:

Those authorised to collect child:

Name:

Address:

Home telephone number:

Mobile:

Relationship to child:

My child/children will be advised that they are NOT to leave the building (Real Journeys Fiordland Events Centre) unless in the care of an authorised person or caregiver.

Emergency contacts other than parents/caregivers:

Name:

Address:

Home Ph number:

Mobile:

Relationship to child:

Health information:

Please list any allergies, illnesses or special needs your child has:

List any medication your child requires:

(if staff are required to administer medication please attach details to the enrolment form)

I do/do not consent to photos being taken of my son/daughter that may be used for promotional purposes (please circle)

Signed: _____ Parent/Guardian