



2010 OCEANAGOLD NUGGETS APRIL SCHOOL HOLIDAY CAMP

The main aim of these camps is to offer the teaching of basketball skills to children and to enhance their understanding and enjoyment of the game. We offer this fun filled, educational two day programme at The Edgar Centre, which offers a modern well-equipped facility for the children. This camp will be run by our current Nuggets Players.

OCEANAGOLD OTAGO NUGGETS CHILDRENS HOLIDAY CAMP DATES:

Camp 1: Monday 12th April & Tuesday 13th April

Camp 2: Thursday 15th April & Friday 16th April

Limited Entries! 9 am – 3 pm Aged 8-13 years old

Costs for the 2 day camps are \$80.00 per child or \$130.00 for 2 children from the same family.

Please fill in the attached application form and send with payment by email to operations@basketballotago.co.nz, fax 456 4053 or send to P.O.Box 2299, Dunedin. For further information, please call the Operations Manager, Basketball Otago on 456 4063.

Payment can be made by Cash, cheque (written out to Basketball Otago) or by internet banking.

If paying by internet banking, please make it to the following account: Please also note Basketball Otago has changed their bank recently and our new account number is listed below.

Name of Account: Basketball Otago – Nuggets

Account: National Bank 06 0901 0385374-04

Please include the child's name and words 'Nuggets Camp' in the reference:

2010 OCEANAGOLD NUGGETS APRIL SCHOOL HOLIDAY CAMP ENROLMENT FORM

First Name:		Surname:	
Sex: FEMALE / MALE (please circle)		DOB: / /	
Address:		Email Address:	
Contact People/Phone No (1):		Contact People/Phone No (2):	
School\I:			
ANY MEDICAL CONDITIONS / MEDICATION REQUIREMENTS			
Camp 1:	Monday 12 th April & Tuesday 13 th April		Camp 1:
Camp 2:	Thursday 15 th April & Friday 16 th April		Camp 2:

Please place a tick beside the camp/s your child/ren would like to enrol for.
The following information must be completed by the above child's parent/guardian:

Mother's Full name:		Mothers Occupation/Company:	
Fathers Full Name:		Fathers Occupation/Company:	
Guardian's Full Name:		Guardians Occupation/Company:	
Parents/Guardian's Email:			
Mobile Ph			
Daytime Ph:			
Evening Ph:			

I agree to Basketball Otago collecting personal information. I have been advised that the information I provide will be used for:

1. Players records
2. Accounting purposes
3. Communication with sponsors for special offers for Basketball Otago members
4. Communication with BBNZ
5. Seeking parents/guardians assistance with Basketball Otago activities
6. Photographs may be taken of coaching sessions and used on the Basketball Otago website and other promotional material.

I accept that this information may later be used for statistical and /or research purposes and agree to its use for that purpose, provided that if the information is published in any way it will not identify me or the individual concerned.

I understand that the information that I provide will be held at the offices of Otago Basketball, I am aware of the rights of access to correction of this information

I give my child permission to participate in Nuggets Holiday Programme and I understand that my child participates at their own risks.

Parent/Guardian Signature:

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