

Summer Sports Camp

For Young People with a Physical Disability and / or Sensory Impairment

Application Form

Name

Address

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D.O.B. **T Shirt Size**

Disability **Wheelchair User.....Yes/No.....**

Telephone **Mobile.....**

Email

Emergency Contact Details

Name

Tel No

Please indicate any special requirements in terms of access, care needs, night time turning routines or diet in the space below:

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Please describe your child's physical disability in detail.....

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Application Form (Cont)

Does your child have a Learning Disability: YES / NO

Does your child take any medication: YES / NO

Please give specific details.....

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Please ensure that your child brings enough medication, pads etc for the duration of the camp

I **DO / DO NOT** (please delete as appropriate), consent to my child being included in photographs/videos taken to publicise the Summer Sports Camp.

I have attached my payment for £90 (payable to Scottish Disability Sport) and have read and understood the camp booking terms and conditions:

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Signed (parent/guardian)

Please return to: **Caroline Lyon, Scottish Disability Sport, Caledonia House, South Gyle, Edinburgh, EH12 9DQ**