

**T.A.G.B.**  
**Tae Kwon-Do**



**Summer Camp**  
**Information pack**  
**2015**

# Summer Camps 2015 Information Sheet

**This information pack contains all the information required to attend any one of the South West of England's Summer Camps**

Junior Camp, Cadet Camp & Adult Camp

- Each Camp has its own individual application form and related paperwork.
- All application forms and related paperwork must be completed in full and submitted along with the relevant fee.
- An up to date passport style photograph must accompany all forms where indicated, this photograph is for identification purposes and must show clearly the individuals full face.
- All forms can be completed online using a PDF reader, and then printed and signed.
- This is the preferred method of completing all forms.

## **Contents of this pack:**

- Junior Camp Application Form
  - Cadet Camp Application Form
  - Adult Camp Application Form
  - Medical consent form
  - Photographic consent
- All completed forms should be sent to the address below before the deadline dates. When application forms are received by the admin team they will be checked and any incorrect or incomplete forms will be returned to the applicant. No places will be allocated until the admin team has received all the correct paperwork including the relevant fees.

## **DEADLINES for submitting 2015 camp applications.**

Junior Camp: 1st June  
Cadet Camp: 1st June  
Adult Camp: 1st June

All completed forms must be sent to: **TAE KWON DO SOUTH WEST  
PO BOX 535  
WESTON SUPER MARE  
NORTH SOMERSET  
BS23 9EX**

All cheques made payable to: **WEST OF ENGLAND TAE KWON-DO**

**Summer Camp Enquiries:** [summercamp@tagbtaekwondo.com](mailto:summercamp@tagbtaekwondo.com)

# JUNIOR SUMMER CAMP

To be held at: Huish Woods, West Hatch, Taunton, Somerset, TA3 5RH

PASSPORT  
PHOTO  
MUST BE  
PROVIDED**Friday 17th July 2015 – Sunday 19<sup>th</sup> July 2015.****One form must be completed for every person attending this camp.****PART 1 (All sections must be completed clearly)**

Forenames:

Surname:

Date of Birth:

Address:  
Inc postcode

Telephone no.: (inc area code)

Emergency Telephone no:

Email Address: (Required)

**PART 2**

TAGB Licence No:

Expiry Date

Present Kup / Dan:

T.A.G.B. School:

Name of Instructor:

Can You Provide A Tent?

YES / NO

Tent Size

I am sharing with:

Teeshirt size (Circle size required)

7-8

9-10

11-12

Small Adult

**PART 3****Training Student**

(8 years up to and including 12 years)

**£75**

(includes t-shirt)

(Please make cheques payable to: **(West of England Tae Kwon-Do)**).*Fees paid are non-returnable under any circumstances unless medical evidence is provided.***MEDICAL NOTE:** Do you suffer from **any existing medical conditions?**

YES / NO

If YES please give details.

**DIETARY NOTE:** Do you have any **specific medical dietary needs?**

YES / NO

If YES please give details.

**PART 4**

I certify that the above facts are correct. I hold myself responsible for any injury that I may sustain while practising, being taught, or competing in Tae Kwon-Do. Save for negligence by the Association or Instructors.

I further undertake to abide by the rules and regulations of this camp if I am accepted as a member.

I declare that I am fit and in good health.

Signature of Child attending:

Date

Signature of Parent/Guardian:

Date

SOUTH WEST OF ENGLAND TAGB TAE KWON-DO

# CADET SUMMER CAMP

AT VERYAN SPORTS CLUB, VERYAN, Nr.TRURO, CORNWALL, TR2 5UW

PASSPORT  
PHOTO  
MUST BE  
PROVIDED

**Friday 24<sup>th</sup> July 2015 – Sunday 26th July 2015.**

**One form must be completed for every person attending this camp.**

**PART 1 (All sections must be completed clearly)**

Forenames			
Surname (Mr. Mrs. Ms)			
Date of Birth:			
Present Address: Inc postcode			
Telephone no: (inc area code)			
Emergency Telephone no			
Email Address.(Required)			

**PART 2**

TAGB Licence No		Expiry Date	
Present Kup / Dan			
T.A.G.B. School:			
Name of Instructor:			
Can You Provide A Tent:	YES / NO	Tent Size	
I am sharing with			
Teeshirt size (Circle size required)	SMALL	MED	LARGE X / LARGE

**PART 3**

<b>Training Student</b> (13 years up to and including 16 years)	£75 (includes t-shirt )	<input type="radio"/>
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(Please make cheques payable to: **(West of England Tae Kwon-Do)**.  
Fees paid are non-returnable under any circumstances unless medical evidence is provided.

<b>MEDICAL NOTE:</b> Do you suffer from any <b>existing medical conditions</b> ? If YES please give details.	YES / NO
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<b>DIETARY NOTE:</b> Do you have any <b>specific medical dietary</b> needs? If YES please give details.	YES / NO
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**PART 4**

I certify that the above facts are correct. I hold myself responsible for any injury that I may sustain while practising, being taught, or competing in Tae Kwon-Do. Save for negligence by the Association or Instructors. I further undertake to abide by the rules and regulations of this camp if I am accepted as a member. I declare that I am fit and in good health.

Signature of Applicant	Date
Signature of Parent/Guardian (For applicants under 18 years of age)	Date

# ADULT SUMMER CAMP

AT VERYAN SPORTS CLUB, VERYAN, Nr.TRURO, CORNWALL, TR2 5UW

PASSPORT  
PHOTO  
MUST BE  
PROVIDED**Saturday 25<sup>th</sup> July 2015 – Saturday 1<sup>st</sup> August 2015.****One form must be completed for every person attending this camp.****PART 1 (All sections must be completed clearly)**

Forenames	
Surname (Mr. Mrs. Ms)	
Date of Birth:	
Present Address: Inc postcode	
Telephone no: (inc area code)	
Emergency Telephone no	
Email Address.(Required)	

**PART 2**

TAGB Licence No		Expiry Date								
Present Kup / Dan										
T.A.G.B. School:										
Name of Instructor:										
Size and Type of Tent:										
I am sharing with:										
Teeshirt size (Circle size required)	3-4	5-6	7-8	9-10	11-12	S	M	L	XL	XXL

**PART 3 (Please tick the where appropriate for this application)**

<b>Training Student</b> (16 years +)	£90 includes t-shirt	<input type="radio"/>
<b>Non Training Partner</b> (16 years +)	£65 includes t-shirt	<input type="radio"/>
<b>Non Training Child</b> (6 to 15 years)	£45 includes t-shirt	<input type="radio"/>
<b>Non Training Infant</b> (5 and under)	Free (£6 if t-shirt is required)	<input type="radio"/>

**Note:** Any student under the age of 18 must be accompanied by a responsible adult.(Please make cheques payable to: **(West of England Tae Kwon-Do)**.)*Fees paid are non-returnable under any circumstances unless medical evidence is provided.***Medical Note:** Do you suffer from any **existing medical conditions**? YES / NO  
If YES please give details.**PART 4**

I certify that the above facts are correct. I hold myself responsible for any injury that I may sustain while practising, being taught, or competing in Tae Kwon-Do. Save for negligence by the Association or Instructors.  
I further undertake to abide by the rules and regulations of this camp if I am accepted as a member.  
I declare that I am fit and in good health.

Signature of Applicant	Date
Signature of Parent/Guardian (For applicants under 18 years of age)	Date



# PHOTOGRAPHY PERMISSION FORM

## SUMMER CAMPS 2015

As part of our communications activities, TAGB Tae Kwon-Do South West occasionally use photography for publicity purposes. We would like your permission to photograph/film the student named below for possible inclusion in our publications, website and other publicity material. The image(s) will remain the property of TAGB Tae Kwon-Do South West and will be used for the designated purpose of promoting TAGB Tae Kwon-Do South West.

Your contact details will remain strictly confidential.

I permit TAGB Tae Kwon-Do South West, to take and use photographs of the student named below for the purpose of advertising during

Junior Camp: 17th July to 19<sup>th</sup> July 2015

Cadet Camp: 24<sup>th</sup> July to 26<sup>th</sup> July 2015

Adult Camp: 25<sup>th</sup> July to 1<sup>st</sup> August 2015

**Name of Student:**

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**Signature of Student, Parent/Guardian** (if student is under the age of 18):

.....

### Important

This form must be completed and submitted along with the relevant Summer Camp Application Forms.

A separate form must be completed for each individual student.

## MEDICAL AUTHORISATION FORM

### SUMMER CAMPS 2015

I authorise you to administer basic First Aid and Pain Relief Medication to the student named below and in your care, during the period indicated, should the need arise:

Junior Camp: 17<sup>th</sup> July to 19<sup>th</sup> July 2015

Cadet Camp: 24<sup>th</sup> July to 26<sup>th</sup> July 2015

Adult Camp: 25<sup>th</sup> July to 1<sup>st</sup> August 2015

For the purposes of Cadet and Junior Camps:

I also authorise you to apply sun cream to the student named below, if and when required.

**Name of student:**

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**Signature of Student or Parent/Guardian** (If student is under the age of 18):

.....

### **Important**

This form must be completed and submitted along with the relevant Summer Camp allocation forms.

A separate form must be completed for each individual student.