

# Canterbury Hockey Club

## Christmas Camps



GKs Included : 10% Discount for 3 siblings : Non-members welcome

Contact Annie Hare | [cjhcpolofarm@outlook.com](mailto:cjhcpolofarm@outlook.com) | 07793799870

## Thursday 21<sup>st</sup> December - Drop & Shop

A festive themed camp, not too serious with lots of fun and games to keep excited little people entertained while you shop for those last few pressies

For players of all standards in Years 2 to 7 - 10.00 to 3.00pm - £30

## Wednesday 27<sup>th</sup> December - Copperbox Classic

An intensive indoor day for players hoping to play at the

Copperbox Tournament over the New Year weekend

By invitation for Years 4 to 9 - 10.00 to 3.00pm - £28

## Thursday 28<sup>th</sup> December - Festive Fun

An indoor morning with top coaches for players in Years 2 to 7

Combine fun with some serious hockey  
10.00 to 1.00pm - £20





<b>Canterbury Hockey Club</b>	
Christmas Camp 2017	
<b>Players Details (BLOCK CAPITALS)</b>	
First Name:	Surname:
DOB:	Age: Sex: M F
Parent's/Guardian's Name:	
Home Address:	
School: Club:	
Hockey Experience: School [ ] Club [ ] County or Above [ ] Additional Info	
<b>Parental Contact Details</b>	
<b>E-mail addresses</b>	
1. 2.	
<b>Telephone numbers</b>	
Home:	Mobile:
<b>Camps: Please tick days required</b>	
<b>Drop &amp; Shop: 10.00 – 15.00: Years 2 to 7</b>	<b>£35</b>
Thursday 21 <sup>st</sup> December	
<b>Copperbox Classic: 10.00 - 15.00: Years 4 to 9</b>	<b>£28</b>
Wednesday 27 <sup>th</sup> December	
<b>Festive Fun: 10.00 – 13.00: Years 2 to 7</b>	<b>£25</b>
Thursday 28 <sup>th</sup> December	
<b>GK? Y/N</b>	

**Medical Information:**

Please detail below any important medical information about your child that we should be aware of including behavioural issues (e.g. epilepsy, asthma, diabetes, allergies, medication, etc). Continue on a separate sheet if necessary.

I hereby consent to my child attending the Canterbury Hockey Club Camp. I agree that hockey is a contact sport and there is the possibility of injury. I therefore consent to first aid being carried out, and also in the case of more serious injury, authorise any responsible adult associated with such activity to consent to such medical treatment as may, in the opinion of a qualified medical practitioner, be necessary for my child.

I agree that Canterbury Hockey Club reserves the right to remove any disruptive children from the course and that they accept no responsibility for loss or damage whether to person or property in connection with this camp.

A also consent to my child being photographed/filmed for coaching or promotional purposes. Please advise if this is not the case.

Signed.....Date.....

**Pre-Booking is required – players will not be included if they turn up on the day**

**Please Make Cheques Payable to Canterbury Junior Hockey Club and return to:-**

**43 Old Bridge Road, Whitstable, Kent CT5 1RQ  
or pay online:**

**Sort Code: 30 64 57**

**Account No: 67455768**

**Reference: use family surname**

**I enclose a cheque in the sum of £...../ I have paid online**

**Any queries please contact Annie Hare – 07793 799870**