



# 2009 WINTER MOD CAMP

13<sup>th</sup> – 15<sup>th</sup> July 2009

*Specialist coaching catering for all skill levels of players 10 to 12 years.*

## **All players receive: -**

- Top class coaching and instruction from NSWRL Development Staff and guest Coaches.
- Dormitory room accommodation with dining, recreation, video, seminar rooms and use of all the Academy's facilities; pool, ropes, canoeing and tennis
- All meals
- 2 nights Accommodation, a Steeden football, 2 training shirts, 1 pair of shorts, a Cap, Water bottle, Camp photo and Certificate of Attendance

The camp fee of **\$310.00** covers everything. There are no additional costs and the three-day camp provides the players with an invaluable Rugby League experience. At all times during the camp, players will follow a carefully balanced program designed to promote skill development, nutrition, sportsmanship, fun and enjoyment. All players are fully supervised throughout the duration of the camp by trained NSWRL Staff and Academy of Sport Staff.

Guest appearances by various NRL players and recreational activities such as canoeing, archery, bike riding, swimming, tennis etc are also included.

*"This camp is an ideal chance for players in the 10 to 12 years age group to receive extra coaching in the skills of the game. Players will be coached by highly skilled and ARL accredited coaches. They will also have the chance to meet players from all over the state"*

## **Discount Rates for Participants:**

Clubs or Schools with 5 – 9 participants are \$300.00 per player.

Clubs or Schools with 10 or more participants are \$295.00 per player.

## **Location:**

Sydney Academy of Sport, Wakehurst Parkway, Narrabeen.

## **Cancellations:**

If cancellation prior to 3<sup>rd</sup> July 2009, a full refund will be given.

After the 3<sup>rd</sup> July 2009, a cancellation fee of \$40 will be charged.

## **For further information, contact:**

NSW Rugby League Academy  
PO BOX 533, Narrabeen NSW 2101  
Ph: 02 9971 0877 Fax: 02 9971 0977  
Email: [academy@nswrlacademy.com.au](mailto:academy@nswrlacademy.com.au)



# APPLICATION FORM

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age as at 13<sup>th</sup> July 2009: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Phone (H): \_\_\_\_\_ (Mob): \_\_\_\_\_

Email: \_\_\_\_\_

Junior League Club/ School: \_\_\_\_\_

Closing date for applicants is 3<sup>rd</sup> July 2009 but places will be allocated on a first receive basis.

**You are advised to book early to avoid disappointment.**

My payment of \$ \_\_\_\_\_ is enclosed.

If paying by cheque, please make out to NSW Rugby League and staple to the back of this application form.

## Personal Particulars

Emergency contact: Given Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Ph: (h) \_\_\_\_\_ (w) \_\_\_\_\_ Relationship: \_\_\_\_\_

Health Care Details: Medicare No: \_\_\_\_\_

Private Health Insurance: Yes  No  Fund: \_\_\_\_\_

## Current History:

Current Medical Problems: \_\_\_\_\_

Any regular medications (name & dosage): \_\_\_\_\_

Allergies: \_\_\_\_\_

Sports Injuries (any current injuries): \_\_\_\_\_

## Past History: Have you had...?

Epilepsy	Yes <input type="checkbox"/> No <input type="checkbox"/>	Hepatitis A	Yes <input type="checkbox"/> No <input type="checkbox"/>	Hepatitis B	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diabetes	Yes <input type="checkbox"/> No <input type="checkbox"/>	Heart Problem	Yes <input type="checkbox"/> No <input type="checkbox"/>	Asthma / Bronchitis	Yes <input type="checkbox"/> No <input type="checkbox"/>
Hernia	Yes <input type="checkbox"/> No <input type="checkbox"/>	Concussion	Yes <input type="checkbox"/> No <input type="checkbox"/>		

## Have you sustained....?

A fracture in the last 3 years? Yes  No  If yes, where? \_\_\_\_\_

A Dislocation Yes  No  If yes, where? \_\_\_\_\_

Do you suffer from...? Recurring pain in any joint with play/ practice? Yes  No

If yes, where? \_\_\_\_\_

Have you ever been treated for Head, Neck or Spinal Injury? Yes  No

Details \_\_\_\_\_

Are you aware of the inherent risks of participating in physical activity such as Rugby League? Yes  No

**I authorise the Camp Directors to arrange any medical treatment needed if required.**

**Successful candidates will be required to abide by the NSW Rugby League's Code of Conduct while participating in the Camp. A copy of which will be forwarded upon receipt of completed application.**

**I agree that any photos taken throughout the duration of the camp may be published for future promotion of the camp.**

**I declare that the above information is a true and correct record as at the date below:-**

Signed: (Player) \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Guardian \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_