

SUNS APRIL SUPER CAMP



CONDUCTED BY

KRAIG SHIELDS & DESLYN APPLEWHAITE

TUES 9TH, WED 10TH & THURS 11TH APRIL

9:00AM - 12:00NOON EACH DAY

AT MONBULK COLLEGE

146-148 DAVID HILL RD, MONBULK

**JOIN IMPORTS KRAIG & DESLYN
AND SUNS BIG V PLAYERS
OPEN TO BOYS & GIRLS
AGED 5-15 YEARS OLD**

\$100 FOR 3 DAYS

OR \$35 PER DAY

**INCLUDES FAMILY PASS TO
BIG V SUNS GAME
FRIDAY 12TH APRIL**

**BYO DRINK BOTTLE & BASKETBALL
SNACKS & DRINKS AVAILABLE
FROM THE KIOSK**



**EMAIL REGISTRATION FORM TO:
secretary@sherbrookebasketball.asn.au**

CAMP REGISTRATION & PAYMENT FORM



Family Surname: _____

Child 1 First Name: _____ Male/Female Age _____

Child 2 First Name: _____ Male/Female Age _____

Child 3 First Name: _____ Male/Female Age _____

Attending: Tuesday ☐ Wednesday ☐ Thursday ☐ All ☐

Parent/Guardian Name: _____

Address: _____

Suburb: _____ Postcode: _____

Phone: _____

Email: _____

Please list below any medical conditions/action plans we should be aware of:

Emergency Contact Name: _____

Emergency Phone: _____

I hereby give my permission for my child/children named above to attend the 2019 April Suns Super Camp and I authorise staff to act for me according to their best judgement in an emergency requiring medical attention. I hereby waive and release the program from any illness, accident or injury incurred whilst at the Camp. I also understand that the Sherbrooke Suns retains the right to use for publicity and advertising purposes, photographic or video footage taken of players at the 2019 April Suns Super Camp.

Parent/Guardian Signature: _____ Date: _____

Credit Card Number: _____

Card Expiry: _____ Security Number: _____

Charge Amount \$ _____ Card Holders Signature _____

OFFICE USE ONLY

Amount Paid: _____ Receipt No. _____ Date: _____