



Cúl Camp – Con Magees

2013 Aug 12th to 16th



A nationally coordinated programme, Kellogg's Cul Camps encourages children to learn and develop sporting and life-skills by participating in a Gaelic Games, in a fun, non-competitive environment.

Irrespective of sporting skill or ability, at Kellogg's Cúl Camps children are encouraged to:

Hone their sporting skills through participation in Gaelic Games.

Learn new ideas and meet new people

Develop a keen sense of fair-play and personal achievement

Stay active and healthy!

Have FUN!

Children will also receive a full set of Kellogg's playing gear (jersey, shorts and socks) and a nifty knapsack!

Camp Fees - Please make cheques payable to **Con Magees GAC**

Individual: £35

Family Cost (brothers/sisters):

2 Family Members - £65

3 Family members - £95

4 Family members - £95

5 Family members - £95

6+more family members - £140

If you child would like to do a second camp without getting gear, there is a reduced cost of only £20.

What to Bring

Packed Lunch (Supervised half hour between 12 & 1 pm)

Suitable playing gear e.g. Runners

Change of Gear on wet days

Towel, Sun Cream if necessary

Your Hurley & Helmet for Hurling Camp.

The Coaching Team

The staff on the Kellogg'sCul Camps are experienced quality coaches (male & female), who have GAA coaching qualifications.

They are enthusiastic people who have a proven record of interacting personally with children.



As in other years we hope to be able to offer the choice of **Cúl Camp Kit** or **Con Magees branded Kit** e.g. T-shirt, Hoodie, Windcheater etc. Please complete the attached form and select the appropriate tick box below to indicate your choice.

Cúl Camp Kit

Con Magees Branded Kit, (Hoodie, Windcheater etc)

APPLICATION FORM
Application form must be completed by an adult in CAPITALS please

Camp Venue: County: Chosen Date(s) Code:

Name: D.O.B:/...../..... Age: Male Female
..... D.O.B:/...../..... Age: Male Female
..... D.O.B:/...../..... Age: Male Female
..... D.O.B:/...../..... Age: Male Female

Address:

Primary School 2013: Email:

Club: Tel No (Parent/Guardian):

Mobile (Parent/Guardian):

Kit Size: 1A (6) 2A (7/8) 3A (9/10) 4A (10/11) 5 A (13/14) (insert Quantity)

PARENTAL/GUARDIAN CONSENT FORM AND DECLARATION

Participants cannot participate if this form is not fully completed and returned to Kellogg's GAA Cúl Camp staff at Registration.

I, Parent/Guardian's Name (please print) confirm that I am the parent/guardian of
..... Child/Children's Name (please print)

and hereby consent and confirm that I have authority to consent that he/she may be conveyed (by ambulance, car or other means) to hospital or a doctor for the purpose of medical attention where such is deemed necessary by Kellogg's GAA Cúl Camp Staff

Does your child/children have any medical condition, allergies or special needs that our staff should be made aware of?

Does he/she/they take any medication? If so, please specify:

I declare that all information and details furnished above are true and correct and that Kellogg's & GAA shall not be held liable in contract or tort for any damage/injury arising from any omission or error on my part.

Data Protection Notice

Information obtained by Kellogg's & GAA becomes part of the data held by Kellogg's & GAA for the purposes of administering Kellogg's GAA Cúl Camps in accordance with the Data Protection Act 1988-2003. In order to continue to improve Kellogg's GAA Cúl Camps, Kellogg's & GAA may contact you by e-mail or phone for research purposes. Kellogg's & GAA may also contact you about future Kellogg's GAA Cúl Camps events.

Please tick the box if you do NOT wish to receive further details of Kellogg's GAA Cúl Camps

NAME (please print name):

SIGNED by (Parent/Guardian):

DATE:

RECEIPT (Please bring this receipt with you on the first day of camp):

Child Name(s):

Camp Venue/Date:

Amount Paid: Signed by Camp Co-ordinator:

For full list of terms and conditions see www.gaa.ie/kelloggscamps (Book another Kellogg's GAA Camp this summer! See brochure for details of reduced cost)
Please supply stamped address envelope if you wish to receive receipt by post.

Saffron Óg– Con Magees

2013 Aug 12th to 16th



Camps specifically for 4-6 year old boys and girls - get involved in our Saffron Óg Summer Camp.

Saffron Óg camps are the first of its kind in Ulster GAA and are specifically designed to develop the fundamental skills of children e.g. agility, balance, coordination, catching, running, jumping and throwing.

The main themes of these camps is "FUN" and are delivered by specifically trained Ulster GAA Fundamental coaches and Antrim Coaches.

Saffron Óg will run Monday to Friday, 10.30am to 12.30pm at a cost of £20.

Each child will receive a goody pack as recognition of his/her participation.

The Saffron Óg camps will run alongside the Kellogg's Cul Camps in the relevant clubs.

To get involved please download the application form which also includes a schedule of when the Saffron Óg camps are taking place.

Parents are asked to register for the Saffron Og camp before the Monday that the camp is due to start. Saffron Og Camps are restricted to 40 Children.

Enjoy your Saffron Óg Camp



SAFFRON ÓG SUMMER CAMP APPLICATION FORM 2013

(Application form must be completed by an adult in CAPITALS please)

Camp Venue:	Chosen Dates:								
Names:	D.O.B.	/	/	Age:		Male		Female	
	D.O.B.	/	/	Age:		Male		Female	
Address									
Primary School					Club				

Email	Tel. No.
	Mobile

Goody Pack!	Go Game Ball/sliothar, water bottle and boot bag
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Parental/Guardian Consent Form and Declaration:

Participants cannot participate if this form is not fully completed and returned to the Saffron Óg Camp staff at Registration I, _____, (Parent/Guardian's Name - please print), confirm that I am the parent/guardian of

Child/Children's name (please print)

and hereby consent and confirm that I have authority to consent that he/she may be covered (by ambulance, car or other means) to hospital or a doctor for the purpose of medical attention where such is deemed necessary by Saffron Óg Camp Staff.

Does your child/children have any medical condition or allergies that our staff should be made aware of?

Does he/she/they take any medication? If so, please specify: _____

I consent to give permission to allow my child/children to be photographed for the purpose of promoting GAA activities. I declare that all information and details furnished above are true and correct and that Saffron Ogs Camps/GAA shall not be held liable in contract or tort for any damage/injury arising from any omission or error on my part.

NAME: (please print name) _____

SIGNED: (Parent/Guardian) _____

DATE: _____

TO REGISTER:

Please bring completed form/s and full fee/s to the first day of the Saffron Óg Camp or give to your Club Kellogg's Coordinator

RECEIPT

Please bring this receipt with you on the first day of camp

Child's Name(s): _____

Camp Venue/Date: _____

Amount Paid: _____ Signed by Camp Co-Ordinator: _____