



YOUNG OLYMPIANS

"Realising Your Dreams"

Wanganui 2010



Young Olympians CAMP Athlete Application Form

ATHLETE CONTACT INFORMATION

NAME	<input type="text"/>	SURNAME	<input type="text"/>
EMAIL	<input type="text"/>	MOBILE	<input type="text"/>
HOME PHONE	<input type="text"/>	DOB	<input type="text"/>
POSTAL ADDRESS	<input type="text"/>	SUBURB	<input type="text"/>
CITY	<input type="text"/>	POSTCODE	<input type="text"/>
CLUB	<input type="text"/>	SCHOOL	<input type="text"/>
FAX	<input type="text"/>		

COACH DETAILS

NAME	<input type="text"/>	SURNAME	<input type="text"/>
EMAIL	<input type="text"/>	MOBILE	<input type="text"/>

HOLIDAY CONTACT DETAILS

If you intend to be on vacation during the month of January, please provide a contact address and phone number of your holiday venue

POSTAL ADDRESS	<input type="text"/>	SUBURB	<input type="text"/>
CITY	<input type="text"/>	POSTCODE	<input type="text"/>
PHONE	<input type="text"/>		

APPLICATION CATEGORY (NB. Top three (3) seniors are assured a place). Please tick

- | | |
|--|---|
| <input type="checkbox"/> Top 3 NZSS Championships Senior | <input type="checkbox"/> Rio 2016 Project Squad Member |
| <input type="checkbox"/> Top 3 NZSS Championships Junior | <input type="checkbox"/> 4th-6th NZSS Championship Senior |

Rio 2016 Project Squad Member	
Option <input type="checkbox"/>	Tour Options (1)Wellington> Wanganui>Hastings>Wellington (2)Wellington>Wanganui>Hastings (3)Wellington> Wanganui>Wellington (4)Wanganui>Hastings>Wanganui (5) Young Olympians Only

PARENT/GUARDIAN APPROVAL

Signed _____

**NB DEPOSIT OF \$100 REQUIRED WITH EVERY APPLICATION
APPLICATIONS DUE 23 DECEMBER 2009**

Please return form to Mary McCartin, "Otoroa", Omatane, TAIHAPE 4794
Email: mary_mccartin@hotmail.com or c.m.mccartin@massey.ac.nz