

Please return completed form to:

Craughwell AC Summer Camps
c/o Michael Tobin
Grenage
Craughwell
Co. Galway



For more information, contact:

Email: summercamp@craughwellac.com

Web: www.craughwellac.com

Phone: Michael @ 087 6591879

Skills development

Trained leaders

Sports Day

3-legged relays



Skills Assessment



Tag rugby



fit 4 fun

Summer Camp 2011

@ Craughwell AC

A summer camp with a difference!

Advanced and beginners programs

Novelty games

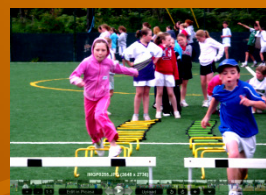
Egg & spoon



Team challenges



Wheelbarrow races

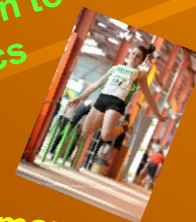


Rounders

Tug-o-war



Introduction to athletics



And many more games

Crazy relays



When?

4th to 8th July

11th to 15th July

15th to 19th August

Where?

Craughwell NS

How long?

10am to 2pm

Craughwell AC's fit4fun multi-sport summer camp is on again!

- Led by trained coaches and athletes from Craughwell AC.
- Aimed at primary school children from sixth class down to first class.
- Open to all children from all areas.
- Places restricted and filled on a first-come first-served basis.
- Fun games and activities
 - Novelty relays – wellingtons, t-shirts, wheels, water
 - Tug-o-war
 - Long jump
 - Novelty running games
 - Throwing
 - High jump
 - Obstacle course
 - Treasure hunts
 - Hurdles
 - And many more fun games



- Advanced coaching for athletics events
- Suitable for all levels of fitness
- Beneficial for all sports
- Skills assessment
- Introduces new sports/events to children
- Progresses existing skills

What you need to bring: Packed lunch and water bottle

What you need to wear: Tracksuit; runners; shorts/tshirt; raincoat; sunhat!

How much?

- €60 per week, with €10 discount if already a member of an athletic club (Athletics Ireland).
- Maximum €120 per family.

Registration Details

Name	Birthday	Camp Date ¹	Club ²
1)
2)
3)
4)

¹ Please indicate the date of the preferred camp.
² Discount available if already a member of an athletic club. If not a member, please include copy of birth cert in order to be registered as a member of Athletics Ireland/Craughwell AC.

Parent/Guardian Contact Information

Name:

Address:

Mobile:

Email:

Secondary Contact Information

Name:

Mobile:

Medical Conditions

If any of the participants have a condition of which we need to be aware, please indicate participant names and condition below.

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Confirmation

I have read and agree to the following conditions:-

- I enclose a deposit of €25 per participant.
- I agree that I and the above participants will be bound by the Irish Sports Council's Code of Ethics and Good Practice for Children's Sport.

(www.irishsportsCouncil.ie/Participation/Code_of_Ethics)

Parent/Guardian Signature:

Date: