



## Junior 16 Sculling Camp-Application Form.

Athlete \_\_\_\_\_

DOB + Age \_\_\_\_\_

2K Ergo time \_\_\_\_\_

NB. This should be the time from the SARA Indoor champs. If athlete did not attend give details of date and time of last test.

\_\_\_\_\_  
\_\_\_\_\_

### Contact Details

Coach / Parent. \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Tele No's \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

E-mail \_\_\_\_\_

Who will be in attendance with the athlete on the day?

\_\_\_\_\_  
\_\_\_\_\_

A reminder that forms will should be returned with full payment by Saturday 25<sup>th</sup> October, with further details n the format of the day to follow thereafter. All cheques are to be made payable to SARA Supplies Limited.