## Judo Saskatchewan Summer Camp July 26 to August 1, 2015



You are invited to come and meet new and current friends when you attend the Judo Saskatchewan Summer Camp to train with the following coaches

### **Ewan Beaton**

Judo Saskatchewan High Performance Coach & Director of Development 2004 Canadian Olympic Coach/ 2008 Olympic Team Leader 1992/1996 Canadian Olympian Judo Canada RTCM

## **Laurie Wiltshire**

Eight Time Canadian National Champion 2007 US Open Champion High Performance Coach Judo Alberta

## **Amy Cotton**

2004/2012 Canadian Olympian Four Time Canadian Champion 25 World Cup Medals Judo Saskatchewan High Performance Coach

## **Scott Tanner**

Judo Nova Scotia High Performance Coach 1998 National Champion Judo Canada Atlantics RTC 2011 University Games Canadian Coach

## Judo Saskatchewan Summer Camp

**LOCATION:** LCBI High School, Ash St. & 4th Ave. Outlook, Saskatchewan. This is an in-residence high school with dormitories and has a full gymnasium and weight room. <a href="http://www.lcbi.sk.ca/begin\_index.htm">http://www.lcbi.sk.ca/begin\_index.htm</a>

**Summer Cost:** The weekly cost will be \$330.00 per athlete which includes all meals and accommodations. The daily drop in fee will be \$65.00 per day.

**Special Option:** 9-10 year old children (2004-2005) \$205.00 for 4 day camp July 26, 2015 to Wednesday July 29, 2015 – they can stay for the full camp (all athletes who 9 – 10 years old should have stayed away at home or are use to being without mom and dad at night time.)

**Airport Transportation:** Judo Saskatchewan will supply Airport transportation to & from the Saskatoon International Airport for **\$10.00 per person** (please include with payment for camp if you will use this service )

**Applications:** Can be located on the Judo Sask website at <a href="http://www.judosask.ca/">http://www.judosask.ca/</a> **Deadline for applications: June 26, 2015.** Late applications will be an additional \$25 per applicant.

FREE T-SHIRT: ALL CAMPERS APPLICATIONS THAT ARE RECEIVED BY JUNE 26, 2015
WILL RECEIVE A FREE SUMMER CAMP T-SHIRT AT REGISTRATION

Please enclose application form and cheque payable to: <u>Judo Saskatchewan</u>

c/o Ewan Beaton; 212-410 Hunter Road, Saskatoon, SK, S7T-0L5

For Camp Detials or Information please contact Camp Director:

Tammy Guthrie

<u>guthrie\_3@msn.com</u>

**MPORTANT:** LIMIT FIRST <u>55 MALE</u> & <u>35 FEMALE</u> APPLICANTS **Minimum Age**: nine years old **Minimum Rank**: Yellow Belt

Toiletries
Rain Gear
Gym Clothes
Jogging Shoes
Night Clothing
Spending Money
Sunscreen

### Things to Bring:

•	Judo gis	•
•	Sleeping Bag	•
•	Bottom sheet	•
•	Pillow	•
•	Mosquito Repellant	•
•	Water Bottle	•
•	Flashlight	•
•	Swim Suit/Towel	

**Arrival Time:** July 26, 2015 – 3:00 PM – 4:00 PM **Departure Time:** August 01, 2015 – 10:00 AM - 10:30AM



# JUDO SASKATCHEWAN SUMMER CAMP APPLICATION FORM

Deadline for Camp Applications is <u>June 26, 2015</u> Please send form and enclose a cheque payable to:

#### Judo Saskatchewan

c/o Ewan Beaton; 212-410 Hunter Road, Saskatoon, SK, S7T-0L5

Name:		Age:	Male/Female (circle one)
Date Of Birth: - Year	Month	Day	-
Address:			
City:		Province:	
Postal Code:			
Telephone #:		Medical #:	
E-mail Address for contact:			
Allergies:		Recent Injuries: _	
Judo Club:		Belt Level:	Years in Judo
judoka and/or the camp. In the ever regret we cannot be responsible for	ent of a dismissal any losses and o	l, there will be no refun or damage to a judoka's	a judoka if it is in the best interest of the don any part of the Camp fee. We also belongings. Permission is hereby given to ay appear in the camp brochure/report or
advance). I agree that having taker responsible for any sickness or accovered under one of their own sick year. If for any reason my child responsible for any expenses incur harmless Judo Saskatchewan (incl	n such precaution cident to my child. kness and/or accirequires medical red. I hereby voluituding their agents any, and all claims	as in your discretion is Parents are therefore r dent insurance plans av attention beyond that nteer release, forever di s, officers, volunteers, e s, demands, or cause of	nless I advise you otherwise in writing (in deemed advisable, you shall not be held eminded to see that their son/daughter is allable at a minimum cost throughout the furnished by the camp, I agree to be scharge and agree to indemnify and hold imployees and all other persons acting in faction, which are in any way connected
Signature of Parent/ Guardian		Date _	
Signature of Athlete		Date	

#### MEDICAL SUMMARY FORM FORMUALIRE DE SOMMAIRE MÉDICAL

Personal Information			
Name			
Province Postal cod DJ / MM / YYAA ( )	-		
D.O.B Date de naissance Phone  Male □ Homme Female			
Medical Information Information Médicale			
Medicare # Assurance maladie  DJ / MM / YYAA  Expiry date d'expiration	P	rovince	
Blood type - Type sanguin	N	Y – O	
Medication - Médicamentation  Details			
Allergies Recent concussion - Commotion récente Date DJ / MM / YY	_ _ 'AA		
Medical History Problèmes Médicaux			
Froblemes Medicaux	N	Y – 0	
Head injury – Blessure à la tête			
Seizure/Convulsion - Convulsion			
Heart problems - Troubles cardiaques			
High blood pressure - Haute tension			
Blood problems/Bruising Problèmes sanguins/Ecchymose			
Asthma - Asthme			
Diabetes			
Menstrual problems - Problèmes mentruels			
Abdominal problems - Problèmes abdominaux			
Heat/Dehydration Bouffée de chaleur/Déshydratation			
Skin disorders/lesions Problèmes cutanés/lésions			
	A	thlete signatu	
		Wit	