



2011 Summer Surf Camps

Parent/Guardian Name: _____

Mobile: _____

Email: _____

Child Name (1): _____

Age: _____

Child Name (2): _____

Age: _____

Child Name (3): _____

Age: _____

Child Name (4): _____

Age: _____

Extra Information (Medical Conditions, Allergies etc) _____

Date (Week Beginning. Please tick):

Number of Days (If less than 5 days, please tick in middle box & specify which days in right column:

Monday 18 th April (Easter)	
Monday 25 th April (Easter)	
Monday 13 th June	
Monday 20 th June	
Monday 27 th June	
Monday 4 th July	
Monday 11 th July	
Monday 18 th July	
Monday 25 th July	
Monday 1 st August	
Monday 8 th August	
Monday 15 th August	
Monday 22 nd August	

5 days (€85)		Mon - Fri
4 days (€70)		
3 days (€55)		
2 days (€40)		
1 day (€20)		

Please return form with payment to the below address.

Please make all cheques & postal orders payable to 'Surf Coach Ireland'.

For Secure Credit Card Bookings, please phone +353 (0) 71 98 41223

Parent/Guardian Signature: _____