

**The ActivZone Boccia Championships**

**A Day Of Friendly Competition for All Ages and Abilities**

**Sunday 7<sup>th</sup> Feb 2010**

Name of Applicant \_\_\_\_\_ DOB \_\_\_\_\_

Name of emergency Contact \_\_\_\_\_

Phone Number \_\_\_\_\_

Emergency Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

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

**What is your disability or impairment?**

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

**Do you have any medication, which could be required during exercise?**

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

**Any other information we should be aware of?**

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

Print Name \_\_\_\_\_

Sign Name \_\_\_\_\_



**Teams of three (if you register as an individual we will endeavour to place you in a team of three.)**

**Name of Team** \_\_\_\_\_

**Player 1** \_\_\_\_\_

**Player2** \_\_\_\_\_

**Player3** \_\_\_\_\_

@ Lakes College

ActivZone, Lakes College, Hallwood road, Lillyhall business Park, Workington, Cumbria, CA14 4JN