

Football Holiday Camp 2025: Application form



THE BREWSTER TRUST's Football Holiday Camp 2025 takes place in various groups between 11th August 2025 and 5th September 2025. The registration fee is BDS\$ 80.00 with a BDS\$ 30.00 refund on full participation in cash. Detailed information on www.football.bb.

egistration ree is 50.55 oc.00 with a 555 50.00 return	id off full participation in cash. Detailed information on www.football.bb.							
	A) APPLICATION PROCESS							
As a charitable organisation THE BREWSTER TRUST targets to support and benefit children and youth in need and to give those with fewer opportunities priority without any discrimination. To take part in the Football Holiday Camp 2025 it is mandatory to fully complete the following application and to submit it within the defined application and registration period.								
Applications will be completely confidential, will be processed on a first come, first served basis, and will be reviewed according to the criteria outlined by our charity. Every applicant will receive a relevant response and/or a confirmation in due time.								
	rnational standards for disadvantaged children or youth. Please tick the relevant box(es) case we need further information, we will contact you directly.							
disadvantaged child or youth or applicant	☐ no ☐ yes, please specify:							
☐ economically disadvantaged:								
☐ out-of-school youth / unemployed:								
in or aging out of foster care:								
☐ limited language proficiency:								
homeless / run away from home:								
at-risk to leave school without graduation:								
former juvenile offenders / risk of delinquency:								
☐ individual with disabilities / special needs:								
☐ other:								
B) SELECT YOUR AGE GROUP								
Age group A : born in 2018, 2017, 2016, 2015, 2016	4, 2013, 2012, and 2011 6 - 13 years.							
☐ Monday, 11 th August 2025, to Friday, 22 nd August 2025, weekdays only, 9.00 am to 3.30 pm								
Age group B: born in 2010, 2009, 2008, and 2007 14 - 17 years.								
☐ Monday, 25 th August 2025, to Friday, 5 th Septemb	per 2025, weekdays only, 9.00 am to 3.30 pm							
Age group C: 18+, born in 2006 or before, youngst	ers / adults / parents / other interested persons.							
☐ Monday, 18 th August 2025, to Friday, 29 th August 2025, weekdays only, 4.30 pm to 7.30 pm								
Coaches and Volunteers, will have the opportunity	to accompany and shadow our implementation; just select your camp week(s):							
☐ 11 th August – 15 th August ☐ 18 th August – 2	22 nd August							
C) PARTICIPANT INFORMATION	(CAMPERS, COACHES & VOLUNTEERS TO COMPLETE THIS SECTION)							
Last name:	First name:							
	ate of birth (dd/mm/yyyy):							
Email address:	Home phone:							
Mobile phone:	Nationality:							







kindly supported by:







Address:								
Parish: Member of a football club:								
Clothing size children:								
Clothing size adults:	□s	□м	□L	☐ XL	☐ XXL			
D) GUARDIAN/EMERGENCY CONTACT INFORMATION								
Last name: First name:								
Relationship: Email address: Emergency phone (during camp times):								
		E) PARTICIPANT	MEDICAL II	NFORMATION				
Medical condition:	□ None	☐ Diabetic	☐ Hyperte	ensive	Other, please specify:			
Allergies:					Other, please specify:			
, me. g.ee.								
Disability / special needs:					Other, please specify:			
Nutritional preference:	☐ None	☐ Vegetarian	□ Ve	egan 🗆	Other, please specify:			
Modigation 9, comments								
Medication & comments:								
F) BREAKFAST CLUB								
With the experience of the last years, THE BREWSTER TRUST intends to organise another Breakfast Club for the upcoming camp to help participants to get a nutritious start into their camp day. This is in response to growing concerns that children were attending the programme without having any breakfast. An implementation depends on additional donations including food from our camp family.								
☐ yes, I am interested in contributing, please contact me ☐ no, I am not interested								
G) PARENTAL CONSENT (FOR PARTICIPANTS 17 YEARS OLD AND YOUNGER)								
I expressly acknowledge that there are certain dangers inherent in participating a football programme. I grant permission for my child / ward to participate in THE BREWSTER TRUST's Football Holiday Camp 2025. I confirm that my child / ward is healthy and capable of participating and that any injury occurring during the camp is not covered by THE BREWSTER TRUST; please note: a specific accident insurance is in place for every participant. I recognise that THE BREWSTER TRUST is not responsible for accidents and/or losses of personal belongings occurring during the camp. I authorise THE BREWSTER TRUST to administer the above-mentioned medical information in co-operation with the medical camp team. I agree that any photographs or videos obtained from the camp are licensed for marketing and other purposes by THE BREWSTER TRUST. Additionally, I am in agreement with the pick-up procedure that the individual camper notifies the relevant coach before leaving the camp as soon as the camper has identified the pick-up person.								
yes no, please specify:								
H) ELECTRONIC SIGNATURE CONSENT								
By checking here, you are consenting to the use of your electronic signature in lieu of an original signature on paper. You have the right to request that you sign a paper copy instead. By checking here, you are waving that right. After content, you may, upon written request to us, obtain a paper copy of an electronic record. Your agreement to use an electronic signature with us for any documents will continue until such time as you notify us in writing that you're no longer wish to use an electronic signature. You should always make sure that we have a current email address in order to contact you regarding any information, this is how we communicate within the camp.								
Declaration of consent		☐ yes	☐ no:					

PARENT/GUARDIAN/COACH NAME (PRINT)

PARENT/GUARDIAN/COACH SIGNATURE