We hope you can join us for fun packed 2020 LimbPower Junior Games on **Saturday 20th June 2020**. This year we are hosting the event at Harvey Hadden Sports Village, Wigman Road, Bilborough, Nottingham NG8 4PB.

**The Junior Games** part of the programme is open to young people aged 5-18 with a physical impairment. The Games will provide your child with the opportunity to try activity and sports in a safe and friendly environment. The activities on offer will include climbing, wheelchair basketball, athletics, cycling, tennis, archery and swimming.

Our **under-5’s programme** is available for children aged 2-5 years old. This programme includes a morning activity session, followed by lunch and an afternoon swimming session. Families of children who are under 5’s are also welcome to attend as spectators between 9am and 3pm if you don’t feel your child is ready to take part.

LimbPower actively encourage siblings to register and take part in the event. Sibling who want to attend and take part will also be required to register and pay the registration fee. Please complete an entry form for each child who is attending.

Why should your child attend the LimbPower Junior Games:

* Learn about physical activity and develop their self-efficacy.
* Learn how to use their prostheses for activity and develop new motor skills
* Improve mobility and prosthetic proficiency
* Have a go at new activities in a safe environment taught by qualified coaches
* Build confidence and self-belief to overcome challenges of being an amputee or living with limb differences
* Improve wellbeing through engaging in preferred activities and interests of choice
* Meet other children ‘like me’ and develop lifelong friendships
* Support with their engagement in school P.E. and sport

Entry forms are now available for downloaded from the LimbPower website [www.limbpower.com](http://www.limbpower.com) or can be sent by email. Please email [carly@limbpower.com](mailto:carly@limbpower.com) to request a form. Completed forms & payment should be returned to LimbPower by **Friday 22nd May 2020**.

**Entry Fee**There is a £10 Entry fee per child (this includes a packed lunch). LimbPower **do not** provide lunch for parents or carers, only for the children who have paid the Games Entry Fee. Meals and refreshments can be purchased at the cafe in the centre or you can bring your own packed lunch. We do suggest bringing a few snacks and a drink from home.

**Spectators/Friends and Family**  
Spectators and supports are welcome to attend the LimbPower Junior Games. If you are bringing friends or family to the event please note that each person will be required to register and sign the Spectator Registration Form at the registration desk on arrival at the event.

**Parking**  
Free parking is available on-site at the venue. There is large **car park** with 16 accessible **parking** bays situated by the reception entrance, so please do arrive early if you require disabled parking.

**Accommodation**

There are several hotels in the area for families who require accommodation. These are a couple of suggestions we have found for you:

***Nottingham West Premier Inn***

<https://www.premierinn.com/gb/en/hotels/england/nottinghamshire/nottingham/nottingham-west.html?cid=GLBC_NOTMIL>

***Travelodge Nottingham Wollaton Park***

<https://www.travelodge.co.uk/hotels/474/Nottingham-Wollaton-Park-hotel?WT.tsrc=GHA_Organic&utm_campaign=GHA_Nottingham%20Wollaton%20Park&utm_medium=GHA_Organic&utm_source=google>

**Directions**

Search: Harvey Hadden Sports Stadium, Nottingham NG8 4PB

<https://www.theaa.com/route-planner/route>

If you need any further information or assistance please contact Carly Bauert on: 07789 075709 or e-mail: carly@limbpower.com.

Final event details will be sent out to all participants two weeks prior to the event. In the meantime, you can call our team or check on the website from event updates. (Please note this programme is subject to change and will be finalised two weeks prior to the event.).

We look forward to welcoming you and your family to the 2020 LimbPower Junior Games.



Kiera Roche

C.E.O.

LimbPower

Entry Form  
  
Please photocopy this form and complete an entry form for each child who is taking part in the event. Please email or post the completed forms to carly@limbpower.com or the address listed at the bottom of the entry form. You will receive conformation of your booking and acknowledgement of any payments you have made.

**Participant details** (PLEASE COMPLETE IN BLOCK CAPITALS)

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title |  | First Name/s |  | | | | Surname | | |  |
| Address |  | | | | | | | | | |
|  | | | | | | Post Code | | |  | |
| Telephone | |  | | | | | | | | |
| Date of birth | | **/ /** | | Age | | | |  | | |
| Email | |  | | | | | | | | |
| Date of Impairment | |  | | | Male / Female | | | | | |
| Brief description of impairment: (only complete this section for a child with an impairment)  Please indicate which assistive aids your child uses on a regular basis.  Power Wheelchair □ Manual Wheelchair □ Prosthesis □ Crutches □ None □ | | | | | | | | | | |

What is the name of your child’s Limb/Disablement Service Centre \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Parent/Guardian/Personal Assistant contact details** | | | | | |  |
| Title |  | First name(s) |  | | Surname |  |
| Address |  | | | | | |
|  | | | | | Post Code |  |
| Tel |  | | | Mobile |  | |
| Email |  | | | | | |

Consent  
Children attending the Junior Games are the legal responsibility of their parents or carer and as such parents are expected to accompany their children at all times while onsite at the Junior Games. LimbPower staff, trustees and volunteers are not acting in “loco parentis” and do not take on the responsibility of looking after children. I   
understand that by completing this form and registering for the event, I pledge to pay the £10 entry fee. LimbPower require information to be able to organise and evaluate this event. Your child will be unable to participate without completing the entry form. By completing and signing this form, you are giving explicit consent for LimbPower to collect this information.

**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Medical Consent Form PLEASE COMPLETE IN BLOCK CAPITALS

We use the requested medical information to ensure that your child is medically fit to take part; to comply with our insurance terms & conditions and to enable LimbPower to tailor the event activities to meet the needs of participating children.

**Medical Information/Special Requirements:**   
Is there anything we should be aware of to ensure your child’s well-being, such as an injury, illness, allergies (including sun cream etc.) or medical condition(s), or any special requirements your child may have. YES NO

If yes, please give details:

Is your child allergic to penicillin? YES NO

Has your child been in hospital as an inpatient in the last 12 months? YES NO

*If yes, we will require consent from your child’s Rehabilitation Consultant/GP giving permission for your child to take part in the LimbPower Junior Games 2020*

Is your child taking any medication that we need to be aware of? YES NO

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Please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Consent Statement:**

My child is in good health and I consider him/her capable of taking part in the Junior Games. LimbPower require primary (new) amputees (less than 12 months since impairment) to get the consent of your GP or Rehabilitation Consultant before taking part in this event.

I have provided medical information above and consent that in the event of any illness/ accident, any necessary treatment can be administered to my child, which may include the use of anaesthetics. I understand that while sports coaches, officials and LimbPower staff will take every precaution to ensure that accidents do not happen, they cannot be held responsible for any loss, damage or injury suffered by my child.

I consent to any emergency medical treatment in the event of an accident.

By completing and signing this form, you are giving explicit consent for LimbPower to collect this information.

Signed (parent/carer if under 18):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Photography Consent

I understand LimbPower and their partners may take photographs during the event and I permit them to use the images for promotional purposes, including on the website and social media.

Do you give permission for your child to be photographed? YES NO

Individual children who do not want to be photographed will be given a yellow wristband to wear during the event. Please note, it is difficult to ensure that an individual is not included by error in group or action shots. Please support us in ensuring your child in not photographed against yours or their consent.

Contact Permission for Parents

**LimbPower will treat your data with the utmost care and we will never sell your data to other companies for marketing purposes.**

LimbPower would like to send you information about future LimbPower events and services by email. Please tick the boxes below to give your consent if you would like to be kept informed about our events and services.

I WOULD LIKE TO BE KEPT INFORMED YES NO

LimbPower would like to send you information about ways you can support the charity e.g. social media campaigns, campaigns and fundraising activities.

I WOULD LIKE TO BE KEPT INFORMED YES NO

I WOULD LIKE TO RECEIVE THE LIMBPOWER E-NEWSLETTER YES NO

**How did you hear about the LimbPower Junior Games – Please tick**

|  |  |  |  |
| --- | --- | --- | --- |
| Social media |  | LimbPower member of staff |  |
| Word of mouth |  | LimbPower website |  |
| Limb Centre |  | Another charity, please name... |  |
| Physical Activity Advisor |  | Another organisation, please name… |  |

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment Form

Fees must be **paid in full** with the Entry Form and received by LimbPower by **Friday 22nd** May **2020** Registration for the event cannot be confirmed until payment has been received. Refunds cannot be issued unless 2 weeks notice of cancellation is received prior to the start of the event unless there are exceptional circumstances. Please note that the entry fee is payable for each child taking part in the activities.

|  |  |  |
| --- | --- | --- |
| Cost | Amount | Total |
| Games Entry Fee (per child) |  | **£10** |  |  |
|  | | |  |  |

**Packed lunches will be provided for participating children.**

Dietary Requirements: ­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Concession:**

\*\*LimbAppeal is LimbPower’s hardship fund. If you are travelling a long distance and require financial support please contact our team about a concession. This is on a first come first served basis and will cease when the fund runs out.

Payment by Bank Transfer

Sort Code: 40-35-40 Account Number: 61459023 **Ref: Junior SM.**

Payment by Cheque or Postal Order

Made payable to **LimbPower** with the **Reference: Junior SM** written on reverse.

Enclosed with this entry form for the Junior Games is a cheque for £

## Payment by Credit/ Debit Card (Visa, Visa Debit, MasterCard)

If you wish to pay by Credit Card, please complete the form below in block capitals:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title |  | | Initials | | |  | | | Surname | | | |  | | | | | | | | | | | |
| Card Number | |  | |  |  | |  |  | |  | |  | |  |  | |  |  |  | |  |  |  |  |
| Valid From | |  | | | | | | | | | Expiry Date | | | | |  | | | | | | | | |
| Issue No. | |  | | | | | | | | | Security No. (last 3 digits  below magnetic strip) | | | | | | | | |  | | | | |

Please debit my account £ sterling in payment for entry to the Junior Games.

I would like to make a donation to LimbPower for £\_\_\_\_\_\_\_\_

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_