

Third Annual NRH Spinal Sports Championship 2015

In partnership with



- Date** **Saturday, 5th September 2015**
Please register by **14th August 2015** (It will not be possible to register on the day)
- Time** Registration at 9am SHARP. Events begin at 9.30am
Presentation of medals and BBQ at 5.30pm
- Venue** NRH, Rochestown Avenue, Dun Laoghaire, Co. Dublin. (Sub venue Cabinteely Park)
Transport will be provided to and from off-site event.
- Entry Fee** €10
Cash/Bank Drafts/Cheques accepted. Payment must be included with registration form
Please make cheques payable to the **National Rehabilitation Hospital**.
- To register for event:** Please forward completed entry forms to: (reference 'Spinalgames2015')
Spinal Injuries Ireland, NRH, Rochestown Avenue, FREEPOST, Dun Laoghaire, Co Dublin
- Queries:** Email: NRHChampionship@gmail.com
Call: (01) 2355224

This is an adult only event. Participants must be past NRH patients.

Places are limited, places secured on first come first served basis.

Please bring appropriate attire for all weather conditions.

Entrant Name: _____ Male Female

Address: _____

Contact No: _____ Email: _____

Date of Birth: _____ Classification: _____

Quadraplegic Paraplegic Limb Absence

Any special dietary requirements: _____

Professional photographers will be present at the event. Please tick here if you **DO NOT** wish to have your photograph taken.

Please tick if you **DO NOT** wish your contact details to be shared with our partner organisation (IWA-Sport, Spinal Injuries Ireland and Dun-Laoghaire Rathdowne Sports Partnership)

<p>Events - Choose any amount of events from Column A - Chose events from either Column B or Column C. It is not possible to enter events from both columns * Indicated non-competitive event</p>		
Column A	Column B	Column C
<p>Archery <input type="checkbox"/></p> <p>Air-soft shooting <input type="checkbox"/></p> <p>Fencing * <input type="checkbox"/></p> <p>Wheelchair Tennis * <input type="checkbox"/></p> <p>Field events:</p> <p>- Javelin <input type="checkbox"/></p> <p>- Shot put <input type="checkbox"/></p> <p>- Discus <input type="checkbox"/></p> <p>- Club Throw <input type="checkbox"/></p>	<p>Table Tennis <input type="checkbox"/></p> <p>Wheelchair Rugby * <input type="checkbox"/></p> <p>Wheelchair Basketball * <input type="checkbox"/></p> <p>Wheelchair Rugby 7s * <input type="checkbox"/></p>	<p>Hand Cycling <input type="checkbox"/></p> <p>Please specify level of experience:</p> <p>Experienced: <input type="checkbox"/></p> <p>Novice: <input type="checkbox"/></p>

