

Olympic ParkTM
Sports Medicine
CENTRE



for all athletes great & small

Careers in Sports Medicine 2011 Wednesday 25th May

Sports Medicine offers fantastic career opportunities. It gives you the chance to work with motivated athletes from all walks of life. You also have the chance to work with sports teams such as your favourite football club, and often get a chance to travel with teams to events such as the Olympic games.



A Careers evening will be held by Olympic Park Sports Medicine Centre within the new AAMI Park Stadium, Olympic Blvd Melbourne.

Date: Wed 25th May

Registration: 6.30pm-7.00pm

Start: 7.30pm

Cost \$25 per student, inc GST.

The careers in sports medicine evening aims to build awareness of the health professional involved in caring for athletes, whether they compete for Australia or exercise for fitness.

DATE

Wednesday 25th May

TIME

6.30pm -7.00pm Registration

7.30pm -9.00pm Talks

RSVP

Please complete Registration form below by 20th May

VENUE

AAMI Park Stadium

Olympic Blvd, Entrance F, Gate 4

Corporate Entrance

Olympic Room 3

PARKING

Car park entrance **F** or **D**

(Off Olympic Blvd)

Parking fees apply

See www.opsmc.com.au for map.

COST

\$25 per student

Parent/Guardian no charge

PROGRAMME

Practitioners from each discipline will be giving short talks and the rest of the team will be available for plenty of question time.

There will also be information handouts available.

Sports Medicine

Nutrition

Podiatry

Psychology

Massage Therapy

Physiotherapy

Exercise Physiology

ENQUIRIES

Megan Marshall

opsmc@opsmc.com.au

**Showbags
and door
prizes**

REGISTRATION

Spaces are limited and you must RSVP by 20th May 2011

Complete the details below. Group bookings are welcome. Post or fax registration to:

Megan Marshall, Olympic Park Sports Medicine, Olympic Blvd, Melbourne, 3004. Fax: 03 94204352

STUDENT NAME/S (attach list if necessary)

CONTACT NUMBER _____

NAME OF SCHOOL: _____

EMAIL FOR SCHOOL: _____

Cheque/credit card details made payable to OPSMC for Students , Total enclosed \$ _____

Card No: _____ Expiry Date ____ / ____

MC Visa Name on card: _____ Signature _____