



JUNIOR COACHING PROGRAMME Annual Booking and Consent Form

CHILD'S NAME: _____ **AGE:** _____ **DOB:** _____

Tennis course you wish to attend (insert code from programme): _____

PARENT/GUARDIAN'S NAME: _____

Parent's email: _____

Telephone: Home: _____ **Mobile:** _____

Medical conditions we need to be aware of: _____

If your child is not a member of the club please see below*

***Type of new membership applying for:** _____ ***Tick if paid** _____

I hereby agree for my child to be enrolled on the above course. I give permission for Emergency Aid trained staff to administer treatment if s/he is unwell. If necessary, I give permission for staff to authorise a doctor to do the same. I give permission for Linkside LTC to collect and store personal data for monitoring purposes in line with the Data Protection Act 1988. I give consent for any multimedia information (photos/videos) to be used for Linkside LTC publicity material. I agree to the terms and conditions of the coaching programme as advertised on the club's website www.linksidetennis.co.uk

Signed -----

Date -----

Course fees should be paid by cash or cheque made payable to the coach who is running the course. Payments should go in an envelope with the booking form, addressed to the individual coach and placed in the secure wall mounted post-box inside the club house or handed directly to the coach running the course.