

Bexley AC – February half term Athletics Session and Sportshall Challenge Tuesday 19th February (6-11 year olds)

Child's details – to be completed by parent or guardian

Name _____ Age: _____

Address _____ D.O.B _____

_____ Postcode _____

School/Club _____

E.mail(parent/guardian) _____ Tel:(Parent/guardian) _____

Emergency Contact: (Name/Tel) 1st _____ 2nd _____

Is there are additional support or medical information that our coaches should be aware of (eg asthma, allergies, epilepsy, medications, disabilities). If none, write NONE

I consent to my special category personal data provided in the box above to be shared with coaches for the purposes of my child's safe participation in athletics activity. This data will not be shared or processed for any other purposes.

My child is in good health and I consider him/her capable of taking part in athletics. I 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 also understand that, whilst the coaches will take every precaution to ensure that accidents do not happen, they can not necessarily be held responsible for any loss, damage or injury suffered by my child.

Please keep my details on your database so I can receive details of future athletics schemes.

I agree that my child may be photographed/filmed for publicity purposes during the scheme.

I enclose a cheque for £..... **made payable to Bexley AC.**

I have paid £..... by bank transfer

I have paid £..... by credit/debit card **or** I have paid cash £....., in person to Bexley AC

Name of parent/guardian _____ Signed _____

Participants will take part in a range of athletic activities. All coaches UKA licensed

Venue:- King Henry School (Erith School,) Avenue Road, Erith DA8 3BN (Sportshall)

Date – Tuesday 19th February 2019 Time:- 10.00 – 12.15

Cost:- £10 per participant (£8 Bexley AC members) - non-refundable

Places must be booked in advance (**closing date Sunday 17th February 2019**) so please complete and return this form to:- Bexley AC, 11 Bedonwell Road, Bexleyheath, DA7 5PP.

