## Bexley AC – May half term Athletics Course Wednesday 29th May 2019

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

Name	Age:
Address	D.O.B
	Postcode
School/Club	
E.mail <sub>(parent/guardian)</sub>	Tel:(Parent/guardian)
Emergency Contact: (Name/Tel) 1st	<b>2</b> nd
Is there any additional support or medical information epilepsy, medications, disabilities). If none, write NON	that our coaches should be aware of (eg asthma, allergies, E
	ed in the box above to be shared with coaches for the purposes of lata will not be shared or processed for any other purposes.
illness/accident, any necessary treatment can be adm	able of taking part in athletics. I consent that, in the event of any inistered to my child which may include the use of anaesthetics. It precaution to ensure that accidents do not happen, they can not or injury suffered by my child.
Please keep my details on your database so I can rec I agree that my child may be photographed/filmed for	
I enclose a cheque for £ made payable to I have paid £ by bank transfer I have paid £ by credit/debit card or I have p	•
Participants will take part in a range of athletic	c activities including running, jumping and throwing.

Venue: - David Ives (Erith)Stadium, Avenue Road, Erith. DA8 3AT

Date: - Wednesday 29th May 2019

Time:- 10.00 - 12.30 Cost:- £10 per participant (£8 Bexley AC members) Cheques payable to Bexley AC

In accordance with safeguarding guidelines please can we request that a parent/guardian of under 8's remain on site for the duration of the session.

Places must be booked in advance (closing date Monday 27<sup>th</sup> May 2019)) so please complete and return this form, along with payment, to:- Bexley AC, 11 Bedonwell Road, Bexleyheath, DA7 5PP.



