



ENGLAND NETBALL COACHING WORKSHOP BOOKING FORM

When applying for an England Netball course please complete **ALL** information on this booking form:

Workshop Name: Talent ID and Selection Workshop

Venue : West London Academy...**Date:** Thurs 11th February 2010 4.30pm to 6.30pm

Candidate Name (Ms/Mr/Miss/Mrs)

Address:

.....

..... **Postcode:**

Tel: **Mobile:**

Email:

Date of Birth:
(Applicants must be 16 years of age)

Emergency Contact Name:

Emergency Contact No:

Medical Information (e.g epilepsy, asthma, diabetes, allergies etc)

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Affiliation Number / Netball ID No: (if applicable)

This information is essential if you wish to receive the lower affiliated course rate.
(Please contact Membership Dept on 01462 442344 if you have any queries relating to affiliation).

Please list below any Netball related awards / qualifications you currently hold:

Awards:	Level	Date achieved
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.....

Please provide information on the individuals or groups you have coached in the last 12 months

Level of performer(s)	No of hours coached per week	Do you receive payment for this coaching role? Y/N
Junior Club U11's		
Junior Club 12-16		
Satellite / County Academy/ Regional Programme		
Senior Beginners e.g. Back to Netball		
Senior Recreational – Clubs local league		
Senior Elite – Club Regional and Premier League		
Other – please state		

What further awards / qualifications would you be interested in attending?

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Payment:

By Cheque only, please ensure you enclose payment. Cheques must be made payable to England Netball with the candidates name clearly printed on the back and returned to:

**Rhiannon Hodkinson
England Netball
Brunel University
The Sports Centre
Uxbridge
Middlesex
UB8 3PH**

Please Note: We are unable to invoice organisations for candidate payment or accept cash payments.

Funding:

If your Club, County or another agency is funding your course attendance, please ask them to clearly state your name / candidate name on the back of the cheque.

Cancellation Policy:

Requests to cancel a booking should be directed to your Course Organiser and will be considered on an individual basis

Are you male or female?			
Date of Birth			
What is your ethnic group?			
White	White British	Black or Black British	Black Caribbean <input type="checkbox"/> African <input type="checkbox"/> Other Black <input type="checkbox"/>
Mixed	White & Black Caribbean <input type="checkbox"/> White & Black African <input type="checkbox"/> White & Asian <input type="checkbox"/> Other Mixed <input type="checkbox"/>	Chinese or Other Ethnic Group	Chinese <input type="checkbox"/> Other Ethnic Group <input type="checkbox"/>
Asian or Asian British	Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Other Asian <input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
		Unknown	<input type="checkbox"/>

The Disability Discrimination Act 1995 defines a disabled person as anyone with a 'physical or mental impairment which has a substantial and long-term adverse effect upon his/her ability to carry out normal day to day activities.'

Do you consider yourself to have a disability?				
If Yes, what is the nature of your disability?				
Visual <input type="checkbox"/>	Learning <input type="checkbox"/>	Hearing <input type="checkbox"/>	Multiple <input type="checkbox"/>	
Physical <input type="checkbox"/>	Other <input type="checkbox"/>	Prefer not to say <input type="checkbox"/>		

FOR OFFICAL USE ONLY:

Any further action required:

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Cheque received: Yes No

Date candidate confirmation letter sent:.....

Signed off by England Netball staff member:.....