

Developing the Next Generation of Cyclists

South Coaching Activities 2011

Type of Session

Date of Programmes
17th and 18th August

Go-Ride MTB/Cyclo-cross Skills 2 days

Age Range
(6yrs – 16yrs)

Venue Details/Address

Harrow Way Community School,
Andover SP10 3RH

Session Timings
(10:00 – 13:00)

Cost £10.00 per day
Please bring completed registration
form on the day
Equipment required, bike, helmet,
appropriate clothing, drink, snack



For further information please contact: Dave Jowett

Mobile Number: 07940433570

Email Address: davejowett@britishcycling.org.uk

Registration and Parental Consent Form

I being the parent/guardian of _____ have read the information contained in this notice and hereby consent to my child taking part in the coaching sessions and understand and agree that my son/daughter participates in coaching sessions under instruction by British Cycling coaches entirely at his/her own risk. I have considered the nature of such sessions and have discussed them with my son/daughter. I am satisfied that my son/daughter is sufficiently responsible and competent to assume full and entire responsibility for his/her own safety under the supervision of a British Cycling coach. I am also aware that British Cycling may take photographs/video footage during the Go-Ride activity and give permission for them to be used in various British Cycling publicity purposes.

Signed(Parent/Guardian): _____ **Date:** _____

Participant Details

Name: _____ **Male/Female:** _____

Date of Birth: ___/___/___ **School Year:** _____ **School:** _____

Address: _____

_____ **Postcode:** _____

British Cycling Membership Number (if applicable) _____

Home Telephone: _____

Email Address: _____

Do you have a disability? Yes/No If yes, please give details: _____

Emergency Contact Details

Name: _____ **Relationship to Participant:** _____

Contact Telephone Number (including area code): _____

Medical Information

Please make a note below of any medical conditions you feel we need to know about. If you have any concerns about your child participating in any form of physical activity then please consult your GP before giving permission for your child to take part in the Go-Ride Activities.

Ethnicity

White
British Irish Other white (please state) _____

Mixed
White & Black Caribbean White & Black African White & Asian
Other Mixed (please state) _____

Asian or Asian British
Indian Pakistani Bangladeshi
Other (please state) _____

Black or Black British
Caribbean African Other black (please state) _____

Disability

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? Yes () No () Prefer not to say: ()

Please indicate event name & dates:

