

# SUMMER

## RECREATION PROGRAMME APPLICATION FORM

Name: .....

Address: .....

..... Postcode.....

Tel: ..... D.O.B. .... Age: .....

Boy / Girl: ..... School: .....

Please indicate if your child suffers from any medical condition or is on any medication:

.....

.....

I wish to attend the (Code & Course Name)

..... - .....

**PLEASE USE ONE FORM PER COURSE**

Please give the names and contact telephone numbers of two people who may be contacted in case of an emergency

Name: .....

Telephone No. ....

Name: .....

Telephone No. ....

*(Parent/Guardian must sign and complete reverse)*



**Causeway  
Coast & Glens  
Borough Council**

# PARENTAL CONSENT FORM

I understand that Causeway Coast and Glens Borough Council, its servants, agents and employees are not under any liability whatsoever in respect of personal injury, loss or damage however caused, as a result of the negligence of the participant or agents, while attending any of these courses.

I give consent for my child to appear in any publicity related photographs in connection with Sports Development courses.

Please tick

**FULL PRICE TICKET £32 per course per person**

**DISCOUNT TICKET £26 per course per person**

Minimum of 3 courses enrolled per household,  
must be booked at same time.

**Signed:** .....  
*Parent / Guardian*

**Date:** .....

**Email:** .....

**If posting:** please return completed, signed and dated application / consent forms together with the course fee to:

**Sports Coaching Courses**  
**Coleraine Leisure Centre, Railway Road, Coleraine**  
**Tel: (028) 703 47202**

Cheques should be made payable to  
**“Causeway Coast and Glens Borough Council”**

I enclose a cheque for £ .....

**If enrolling in person:**  
**Enrolment starts from 8.30am Saturday 2 June 2018**  
**in the following centres:**

**COLERAINE LEISURE CENTRE**  
**JOEY DUNLOP LEISURE CENTRE, Ballymoney**  
**ROE VALLEY LEISURE CENTRE, Limavady**  
**SHESKBURN RECREATION CENTRE, Ballycastle**



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