

Holiday Junior Tennis Camp

21 April 10 a.m. - 3 p.m.

- **Activities for all children**
- **Supervision at all times**
- **Rackets and balls provided**
- **Wear loose fitting clothing and trainers**
- **Bring a packed lunch and a drink**

Code of Conduct

A current licence to coach is essential, as is maintaining high ethical standards of coaching, keeping skills, knowledge and qualifications up to date, ensuring the safeguarding and well being of others. The rights, dignity and worth of all participants must be respected, regardless of age, gender, ability, race, cultural background, religious beliefs or sexual identity.

Duty of Care Policy

All children must be accompanied to the designated area of activity by their Parent/Carer and remain the responsibility of the Parent/Carer until handed over to the coach. At the end of the session, children must be collected from the designated area. If someone other than the Parent/Carer is picking up your child, then a letter of consent must be provided in advance and the named person must produce proof of ID upon collection e.g. Driving Licence. All children attending must complete a booking form detailing any medical conditions/emergency contacts.

Please feel free ask me about other fun and affordable tennis sessions at Allenburys

Mandy Bishop, LTA Performance Coach
07551 285032
mops@mobileemail.vodafone.net
www.3tenn.net

Booking Form

Please provide the following details with your cheque for £20 payable to A.Bishop:

Player's Name: **DOB:** **BTM:**
Address: **Telephone:** (Home)
Mobile/Other: **Email:** (very useful, if you have one)
Name & Tel no. person collecting child/contact in an emergency:
Name & Address of Doctor: **Tel No:**

Medical Questionnaire - Does your child suffer from the following: (please circle one)

Epilepsy or respiratory trouble	Yes/No	Diabetes	Yes/No
Allergies (pollen/additives/food)	Yes/No	Are they taking medication?	Yes/No

Please list details of other relevant conditions:

If you have answered 'YES' medical forms must be completed prior to registration.

I have read/understand the Duty of Care Policy, agree to abide by the Terms & Conditions

I understand my child takes part in these activities entirely at their own risk

I give consent for my child to receive urgent medical treatment if necessary

I am happy to be contacted about future tennis events in my area

I **DO NOT** wish my child to be photographed/videoed for publicity or technical analysis (please circle one) **Yes/No**

Signed: **(Parent/Carer)** **Date:**