

Stoke Golding Tennis Club

Summer School 2010

Monday 2nd – Thursday 5th August

Name of child:

Days attending: Monday Tuesday Wednesday Thursday
(please delete any days when child cannot attend)

Emergency contact details during the activity:

Name:

Phone no:

Any known allergies/medicines given?

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I allow my child to take part in the tennis activity at Stoke Golding. I agree that they must follow all the rules given for their own health and safety. If these rules are not followed I accept that my child may be asked to leave the course.

Signed:

Print name:

Date:

Thank you – here's to safe and enjoyable tennis.

Dom Holmes DCA Licensed Coach.