



Application To Join Winter Coaching Sessions 2023 – 2024

Venue: West Park School, West Road, Spondon, Derby, DE21 7BT
Dates: 4th November 2nd December 27th January 17th February 9th March
(Tick dates as appropriate)
Even though it would be best to attend each session this is not compulsory. If you can only make 1 or 2 that's fine.

Time: Shooting from 10am until 3.30pm (setting up from 9am)

Seniors

I would like to attend on the above dates.

Archer's Name: *(please print)* Bow style:

Club: Classification / Handicap

I am a recreational archer a competitive archer not sure

Juniors

I would like my child to attend on the above dates.

Archer's Name: *(please print)* Bow style:

Club: Classification / Handicap

My child is a recreational archer a competitive archer not sure

Parent /Guardian Name: *(please print)*

The cost is £15 per senior archer per session, and £7 per junior archer per session. Payment via BACS in advance is preferable. Payments made in advance are non-refundable.

BACS payments:

Account name: Derbyshire County Archery Association

Account number: 54887933

Sort code: 60 01 41 Please quote your surname and "coaching" as the reference.

Payment can be made by cheque payable to Derbyshire County Archery Association.

Payments can be accepted on the day, but in advance is preferable to cut down on admin time at each session. **Booking a place is essential even if you opt to pay as you go.**

To assist the coaches, it would be useful to have a photo of all archers. The photo will be attached to the front page of the archer's portfolio to enable coaches to identify archers who are not known to them. All information in the portfolio is available to archers at each session, although they will be retained by the coaching staff for reference. A camera is a good coaching tool, please bring one with you if you can (the camera on your mobile 'phone will be fine). Enclosed with this form is:

Passport style photograph (attach in the email)

Cheque for £

I have made a BACS payment of £ sent on:

Completed forms should be emailed as a pdf or word document or posted to Alison Page If you require further information, please do not hesitate to contact me.

☎ 07527156234

✉ alisonmpage@yahoo.com or 23 Ford Lane, Derby DE22 2EX

Archer's Name	Date of Birth (if under 18)
Parent / Legal Guardian Name (if archer under 18)	Contact Telephone Numbers (to be used in case of emergency)
	Home: Parent / Guardian Mobile (if archer under 18):
Address	
E-mail:	
Postal (if no email address):	
Please give additional contact telephone numbers and name in case we cannot get hold of the main contact quoted above.	
The archer is 17 years of age and I wish them to arrive and depart independently.	Please state any known medical conditions that may affect you / the junior archer during the archery session, and the preferred course of action.
To the best of your knowledge are you / the junior archer allergic to any medication?	Do you / the junior archer require special medication or medical equipment?
<i>If yes please give details.</i>	<i>If yes please give details:</i>
Which club are you a member of?	What bow style do you shoot? (i.e. recurve, compound longbow or barebow)
<p>These archery sessions will include physical activity which may include physical contact with coaches and other archers, involving strength, stamina and flexibility. Archers will be encouraged to perform only within their own limits. Please quote any circumstances where this may not be appropriate for you / the junior archer under medical conditions noted above.</p> <p>I agree to the archer taking part in physical activity.</p> <p>I consent to photographic and video media being produced of me / the junior archer as part of the coaching programme. From time to time, we may take photographs or video of the archers and staff to celebrate a particular occasion which we would like to promote through the websites or other media of DCAA; EMAS; Archery GB.</p> <p>The above information will be treated with the strictest of confidence on the understanding it may be shared with Derbyshire Development Group staff or other professionals for the care of you / the junior archer.</p>	
Signature (parent's signature if archer under 18)	Date