

## London Summer Holiday Coaching Activities 2009



**Monday 26/10/2009 to Friday 30/10/2009**

**Go-Ride Track sessions for all abilities**

**(Mountain Biking or Turbo if wet)**

**For ages 7-15**

**Herne Hill Velodrome**

**104 Burbage Rd**

**Herne Hill**

**SE24 9HE**

**From 10am to 3pm**

**£7.50 per day**

**Includes track bike and helmet hire if required**

**Please bring your own Mountain Bike if it's wet**

**Due to the popularity of these courses  
advanced booking is recommended**

**Quality coaching led by Qualified British  
Cycling Coaches**

**For further information please contact:**

**Email: [hernehillbookings@gmail.com](mailto:hernehillbookings@gmail.com)**

**Emergency Phone Contact: 07841 635 598**

**To book a place please complete the form opposite and return to:**

**VC Londres**

**Herne Hill Velodrome**

**104 Burbage Rd**

**Herne Hill**

**SE24 9HE**

**Please ensure that riders have gloves and clothing suitable for the weather forecast along with packed lunch and plenty of drinks**

## 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) \_\_\_\_\_

Chinese  Any other (please state) \_\_\_\_\_

Please ensure that the completed form is returned to the address overleaf prior to taking part. **Please make Cheques Payable to VCLHH**

**Note:** All information is stored within Data Collection Act rules, details are available on request.

**Dates requested @ Herne Hill :-**