



TIME TO LISTEN WORKSHOP Booking Form



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|---------------|-----------------------|-------|----------------------|
| Workshop Name | Time to Listen | Venue | UWE |
| Date | 13/10/16 | Time | 18.30 – 21.30 |

Please complete the requested information below in FULL on this form and return to:
rachel.bussey@englandnetball.co.uk

| | |
|--------------------------------|--|
| Delegate Name | |
| Landline Tel No | |
| Mobile No | |
| Email Address | |
| Postal Address | |
| EN Affiliation No | |
| Emergency Contact Name | |
| Emergency Contact Tel No | |
| Medical Information | |
| Netball Club Name | |
| Role at Club* | |
| Club Affiliation No | |
| Club Region | |
| Club CAPS status (if relevant) | Working towards <input type="checkbox"/> Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/> |

| | |
|--|---|
| I have attended a <i>Safeguarding & Protecting Children</i> or equivalent course in the past | Yes <input type="checkbox"/> *No <input type="checkbox"/> |
| If no, please advise me as you will need to attend this prior to TTL. | Please contact me, <Tel no>, <email> |

| | |
|--|--------------------------|
| I agree that England Netball can use the above details to register me on this Time to Listen workshop, monitor attendance and validity for CAPS purposes, and ensure adequate safeguarding training is provided. | <input type="checkbox"/> |
|--|--------------------------|

*Please note: England Netball regrets that it is unable to fund attendees who are not Club Safeguarding Officers. Consequently, there is a small charge of £30 for non-CSO attendance at TTL. Cheques should be made payable to: England Netball.

**Thank you for completing the above details. Please can you return your Booking Form to me:
rachel.bussey@englandnetball.co.uk
When I receive your Booking Form I will send you confirmation and full details.**

