

## Enrolment Form for Elite Gymnastics

Complete and return to Diamonds Gymnastic Club.

| CLUB       |  |
|------------|--|
| Club Name: |  |

| COACH             |            |
|-------------------|------------|
| Name:             |            |
| Qualification:    | BG number: |
| Address:          |            |
| Postcode:         |            |
| Telephone number: |            |
| E-mail:           |            |

| GYMNAST         |        |        |
|-----------------|--------|--------|
| Gymnast's Name: | D.O.B. | Level: |

| SCHEME DATES <i>(please tick)</i> |  |                     |  |                     |  |
|-----------------------------------|--|---------------------|--|---------------------|--|
| 1. Mon. 4th August                |  | 2. Wed. 6th August  |  | 3. Fri. 8th August  |  |
| 4. Mon. 11th August               |  | 5. Wed. 13th August |  | 6. Fri. 15th August |  |

| PAYMENT   |       |
|---|-------|
| Payment of (cheque) £                      enclosed for    gymnasts for    sessions.                |       |
| <i>(Made payable to Diamonds Gymnastic Club). Full payment must be sent with this booking form.</i> |       |
| Signed Coach:   |       |
| Print Name:   | Date: |