

**Please complete this registration form in block capitals and black ink**

The purpose of this form is to apply for and/or register yourself on to a coach education programme. You can complete this form electronically and send it back to British Fencing at [charlie.miller@britishfencing.com](mailto:charlie.miller@britishfencing.com) or you can download it, print it off and send it back to via the post to

*The National Development Administrator, British Fencing, 1 Baron's Gate 33-35 Rothschild Road, London W4 5HT*

Either way you must send a cheque, payable to **British Fencing** (marked 'Coach Development Registration' on the reverse) for £40 (£20 if already received the appropriate manual from previous course attendance) to HQ British Fencing at the address shown above. Any additional level/weapon a further £15 assessment fee has to be paid. (Please note that this fee is for coach development NOT membership of British Fencing and covers study materials, assessment and certification).

Declaration: I wish to register on the Coach Development Scheme and I consent to my details being held on the Coach Database

Signed \_\_\_\_\_ Date \_\_\_\_\_

*NB Applicants under the age of 18 must have this form counter-signed by a parent or carer (see below)*

Name: \_\_\_\_\_ Gender: Male Female

Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Would you describe yourself as: *White British...White Other...Asian/Asian British...Chinese...Black/Black British... Other (please describe)*

BFA Membership number: \_\_\_\_\_

Date of Birth (if Under 18): DD/MM/YYYY

Fencing Club/Clubs: \_\_\_\_\_

Region: \_\_\_\_\_

Your Coach: \_\_\_\_\_ Your Coach Educator (for this course) \_\_\_\_\_

Dates of coach education programme (if known): \_\_\_\_\_

Location of programme (if known): \_\_\_\_\_ Fencing experience (No of years): \_\_\_\_\_

Competitive level: Club  County  Region  National  International  Veteran  Retired

Fencing Proficiency: Grade/Weapon & Awarding Body? \_\_\_\_\_ National ranking? \_\_\_\_\_

Coach Qualifications held: \_\_\_\_\_ Awarding Body: \_\_\_\_\_ Date awarded: DD/MM/YYYY

\*Enhanced CRB Disclosure Certificate No (must be issued by BFA): \_\_\_\_\_ Date of Issue: DD/MM/YYYY

\*First Aid Qualification: \_\_\_\_\_ Date of Issue: DD/MM/YYYY

\*Child Protection training; Name of programme: \_\_\_\_\_ Date of Attendance: DD/MM/YYYY

Coach Qualification Applied For: Level 1  Level 2  Level 3  Level 4

Weapon: Foil  Sabre  Epee

Countersignature of Parent or Carer if Applicant under 18 \_\_\_\_\_

Name (PRINT) \_\_\_\_\_

Date DD/MM/YYYY

For Office Use: Form received DD/MM/YYYY Fee received Details logged Materials sent

Copies seen:

CRB Certificate No Date of Issue DD/MM/YYYY First Aid Certificate Date of Issue DD/MM/YYYY

Membership Expiry DD/MM/YYYY Child Protection Seminar Attended DD/MM/YYYY

Exam Pass Date of Issue DD/MM/YYYY Coach Certificate Issued DD/MM/YYYY Re-validation due DD/MM/YYYY

*\*delete if not held yet*