

# **Walsall Artistic Roller Skating Club**

## **Beginners Course Application Form**

**Course Start Date:** \_\_\_\_\_

### **About the student**

**Name:** \_\_\_\_\_

**Age (if under 18):** \_\_\_\_\_

**Skate Hire Required: Y / N    Size** \_\_\_\_\_

**Previous experience / Level Attained:** \_\_\_\_\_

**Contact details** (for under 18's this should be the parent/guardian)

**Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

### **Health**

**If you have any health issues that might affect your course please inform the coach**

*Office use*

**Paid** \_\_\_\_\_ **Ref** \_\_\_\_\_