



## FREE GOLF COACHING GRANT AID 2008 FOR BEGINNERS/NON MEMBERS

### Application Form – 1<sup>st</sup> January 2008 to 31<sup>st</sup> December 2008

Name of Golf Club: \_\_\_\_\_

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

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

Name of Club Applicant: \_\_\_\_\_

Position held within Golf Club: \_\_\_\_\_

Contact Telephone Number (daytime): \_\_\_\_\_

Telephone Number to book lessons on if different to the above (please note that this number will be publicised)

\_\_\_\_\_

Contact e-mail address: \_\_\_\_\_

Golf Club website: \_\_\_\_\_

Name of PGA Professional(s): \_\_\_\_\_  
conducting the sessions

PGA Professional level of qualification: \_\_\_\_\_

Has your golf club requested an Enhanced Level Criminal Records Bureau (CRB) disclosure for your PGA Professional/Assistant/Trainee?

Yes

No

Date of disclosure: \_\_\_\_\_

Have any of your coaching staff attended a Sports Coach UK 'Safeguarding & Protecting Children' workshop or a 'Good Practice and Child Protection' workshop?

Yes  No

Date / location of workshop \_\_\_\_\_

#### **Advertising:**

To help us issue press releases regarding the 'Free Golf Coaching' at your facility please list the 4 main publications that you believe are the most influential/beneficial in your area.

Advertising the Free Golf Coaching sessions is vital in attracting beginners to your venue, so we recommend that you also place advertisements in your local papers.

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

Conf Letter: .....	For Office Use:	Cheque no: .....
Pack Send: .....		Date Sent: .....
PR - SDO: .....		Amount: .....
PR - Press: .....		BACS Payment: .....

## Suggested Options for completing the 8hrs coaching sessions

Please note sessions should ideally consist of 75% Adults and 25% Juniors

Please fill in the **Chosen Option** box below, complete the **Date/s & Details** section and specify what type of sessions are being held. *Please note Options 1-5 are only suggestions, if you are planning a different format, please choose Option 6.*

<b>Option 1</b>	1 DAY or SEPARATE DAYS
<b>Option 2</b>	1 WEEKEND
<b>Option 3</b>	CONSECUTIVE WEEKENDS
<b>Option 4</b>	DAYS DURING SCHOOL HOLIDAYS
<b>Option 5</b>	1 – 2 HOURS EVERY SATURDAY and/or SUNDAY FOR A MONTH/S
<b>Option 6</b>	OTHER COMBINATION

**Chosen Option:**

### Date/s & Details:

Please specify who the sessions are aimed at, for example: everyone, adults only, females only.

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- *If your golf club is looking to run extra taster sessions for priority groups and would like support in this area, please contact your Regional Development Officer to discuss.*

**Please note: as of January 2009, all Professionals undertaking junior coaching as part of the EGU/ELGA grant aid initiatives, must obtain a CRB Enhanced Disclosure and have attended a SPC workshop.**

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Please note this form should ideally be returned at least **8 weeks** prior to the first coaching date to aid administration and promotion. Please return the form in the pre-paid envelope provided and we shall contact you once the date/s have been registered - **please keep a copy of this form for your reference.** A confirmation letter will be sent via e-mail (if applicable). If you would prefer to receive the information via post please tick box

Please sign the form to acknowledge that you have read and understood all of the enclosed literature relevant to the Free Golf Coaching Grant.

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

Print Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

All cheques will be made payable to the Golf Club. If you require your cheque to be made payable to someone specific please specify their name and position below. Alternatively, payment can also be made by BACS, please tick box if preferred and a form will be sent out with the confirmation.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

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