

Children's Beginner Course

Sessions are designed for children aged 7-14 and are suitable for those with little or no previous fencing experience. The children receive a high quality learning experience as class sizes are limited.

There is a strong emphasis on safety, discipline and fun. Technical moves are taught along with games and practice fights to keep the young fencers interested and motivated.

2017 Summer Term Dates

19th April – 12th July

(No sessions on the following dates due to exams & half term: 10th & 31st May & 14th June)

Day: Wednesdays

Time: 6:00pm – 7:30pm

Cost: £130 – 10 week course

IMPORTANT – PLEASE NOTE THE TWO VENUES

Venue for April & May dates as follows:

Notre Dame School Sports Hall, Convent Lane, Cobham, Surrey, KT11 1HA

Venue for June & July dates as follows:

ACS Cobham International School, Portsmouth Road, Cobham, KT11 1BL

Please return the contact form below with your payment to: Marc Bengry, 29 Hamilton Avenue, Cobham, Surrey, KT11 1AU. Cheque payable to 'Cobham Fencing Club'. If you wish to pay by bank transfer then please email me for details – marc@cobhamfencingclub.co.uk

You will be notified by email that your place has been reserved upon receipt of your payment.

Contact Information Children’s Beginner Course Summer Term 2017

Name

Address.....

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Date of Birth

Parents/Guardian Name.....

Contact telephone numbers.....

Email.....

In order to comply with the requirements of the Data Protection Act we need your written permission to store your child/ren’s name and address details on the Cobham Fencing Club’s Database. Personal details of members are not disclosed to any third party.

From time to time registered members of staff and volunteers directed by the club coaches may take photographs, or video:

- For training purposes to encourage and as a learning tool
- To endorse Cobham Fencing Club on promotional materials including web, club noticeboard, newsletters etc (we will advise you where and how images will be used)

Medical Information: Please indicate any medical information that may affect your participation in high intensity exercise and note any medication that you will have with you.

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I have read and understood the above information

SignatureDate

Signature of Parent or Guardian