



FRIENDS of ALLONBY LIVERPOOL CANOE CLUB

REQUEST FOR RE-IMBURSEMENT OF COACHING COURSE FEES

Applicant's Name:

Address:

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Tel No(s): Email Address:

Full Title of Course attended:

Course Provider:

Date(s) of attendance: Cost of Course:

Qualification awarded:

Please provide copies of your Award Certificate and Receipt for the Course Fee.

Please use the space below to provide details of the coaching you have done within the Club since gaining the above qualification (*please use back of form if more space is required*):-

Applicant's Signature: Date:

Comments / Recommendation – Coaching Development:

Signature: Date: