



Dave Sanger  
Tennis Coaching



**Southbourne  
Tennis Club**  
Registered Charity:1185919 CRM:0001398  
Iford Lane, Bournemouth, BH6 5NF



Southbourne  
Tennis Club  
Registered Charity:1185919 CRM:0001398  
Iford Lane, Bournemouth, BH6 5NF

[www.southbournetennisclub.co.uk](http://www.southbournetennisclub.co.uk)

**Dave Sanger Head Coach**

Mobile **07812 676761**

Email: [davesanger@gmail.com](mailto:davesanger@gmail.com)

**SOUTHBOURNE TENNIS CLUB  
INDIVIDUAL TENNIS LESSONS**

**For Children and Adults  
Run by Dave Sanger Tennis Coaching**



**More information**

[www.southbournetennisclub.co.uk](http://www.southbournetennisclub.co.uk)

**Dave Sanger Head Coach**

Mobile **07812 676761**

Email: [davesanger@gmail.com](mailto:davesanger@gmail.com)



**PRIVATE TENNIS COACHING FOR ADULTS & CHILDREN;**

Private coaching is available to all players and is the quickest & most effective method to improve your game, whatever your standard (subject to availability). **24hour cancellation fee**~ notice of at least 24 hours is expected for any private lessons cancelling. If notice is given less then 24hours, then the full lesson fee will be charged. *Please note fees non member's fees apply*

**Dave Sanger (Head Coach) Level 4 Senior Performance Coach LTA Licensed; 07812 676761**

**Ray Burningham Level 4 Club Coach LTA Licensed; 07880 910907**

**Matt Sanger Level 3 Performance Coach LTA Licensed; 07931 265935**

**Adverse Weather Conditions** ~ If adverse/wet weather conditions prevail it should be mutually agreed that the weather conditions are unfit for play before a lesson is cancelled. Be aware that the Coach may not be able to make a decision about the weather until 15minutes before the lesson is due to commence. Please always check with the Coach.

**INDIVIDUAL COACHING ENROLMENT FORM**

Name ..... DOB .....

Address .....

Postcode ..... School attending (Juniors only). ....

Tel ..... Mobile .....

Email .....

Any health problems/Learning Difficulties? .....

Emergency contact info .....

\*I give my permission for my child or myself to be treated with emergency first aid by the first aider on site if any accident may occur at Southbourne Tennis Club.

\*I give my permission for my child or myself to be involved in any publicity (including photographs/videos/website) surrounding coaching activities at Southbourne Tennis Club.

\* I give my permission for my child or my details to be held by Dave Sanger Tennis Coaching LTD/Southbourne Tennis Club for registers and regular updates/news.

**Signed (Parent/Guardian if under 18) .....Printed.....**

Please return all forms to the coach.

## Tennis Readiness Questionnaire

**ALL INFORMATION WILL BE TREATED CONFIDENTIALLY**

Forename: \_\_\_\_\_ Surname: \_\_\_\_\_

		Please choose	
1	Has your doctor ever said that you have heart trouble?	YES	NO
2	Do you ever have pains in your heart or chest?	YES	NO
3	Do you ever feel faint or have spells of dizziness?	YES	NO
4	Do you have any bone, joint or neurological problems that could be made worse by exercise?	YES	NO
5	Have you ever been told that you have high blood pressure?	YES	NO
6	Are you taking any prescription medications, such as those for heart problems, high blood pressure, high cholesterol, diabetes or asthma?	YES	NO
7	If female, are you pregnant or have you had a baby in the last 6 months?	YES	NO
8	Do you have any other medical conditions that we should be aware of? If yes, please explain _____	YES	NO
9	Has anyone you are related to died of a heart problem under the age of 50? _____	YES	NO

### Informed Consent Form

I wish to participate in Tennis. In return for the Coach and Southbourne Tennis Club accepting me as a participant in Tennis, I represent and confirm as follows:

1. As required for participation in Tennis, I have completed a Tennis Readiness Questionnaire and have, where required, submitted a Doctor's Medical Form and any additional medical tests and/or forms to the Coach.
2. I understand the nature and the purpose of Tennis and I am aware that any strenuous physical activity involves certain risks. I assume the risk of any and all accidents or injuries of any kind which may be sustained by me by reason of, or in connection with, my participation in Tennis. I release, discharge and absolve the Coach and the Club and each of their officers, directors, employees and agents from any and all liability or responsibility for any such accident or injury except to the extent that such accident or injury is caused by or results from any negligent act or omission of the Coach or the Club or any of their officers, directors, employees and/or agents. This release shall be binding upon my heirs, executors, administrators and assigns.
3. While participating in Tennis, I agree to abide by the Coach's instructions at all times.
4. I understand that the Coach and/or the Club may from time to time use statistical, medical or other data obtained during the course of the Tennis programme for professional purposes only (names will be undisclosed and kept confidential) and I hereby consent to such use of my personal data. To View our Privacy Policy please visit our website.

I have read and understand this form and consent to its terms. I hereby sign voluntarily and with full knowledge of its significance.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

*Notes for Coach*

*Player background/previous experiences;*

*Goals for Tennis;*

*Any Additional information that may assist the coach;*