To register for the sessions, please indicate your choice(s) of session and provide your details below:

|  |  |  |  |
| --- | --- | --- | --- |
| Monday 6 April – Glenwood, Glenrothes |  | Monday 13 April – Windmill, Kirkcaldy |  |
| Tuesday 7 April – Levenmouth, Buckhaven |  | Tuesday 14 April – Glenwood, Glenrothes |  |
| Wednesday 8 April – Windmill, Kirkcaldy |  | Thursday 16 April – Dunfermline High School |  |
| Thursday 9 April - Dunfermline High School |  |  |  |

|  |  |
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| **Bike Hire / Cycling** | Call Lochore Meadows on 01592 853388 |
| **Mainstream Sports Camps** | Call Sports Development on 01383 602393 |
| **Disability Sport Fife** | Call Disability Sport Fife on 03451 555555 ext. 444989 |

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| --- | --- | --- | --- | --- | --- | --- |
| Name |  | | | | | |
| Address |  | | | | | |
|  | Postcode: | | |  | |
| Contact Tel No. |  | | | | | |
| E-mail Address |  | | | | | |
| School |  | | D.O.B. |  | | |
| Impairment  (e.g. cerebral palsy, visual impairment etc.) |  | | | | | |
| Secondary Conditions (e.g. epilepsy, diabetes, asthma etc.) |  | | | | | |
| Any Other Relevant Information |  | | | | | |
| Emergency Contact Name |  | Tel No. | | |  | |
| Photographic Images | I agree for my child/the participant being photographed for promotional purposes (please tick) | | | | | Yes 🞎 No 🞎 |
| Promotion | Active Fife would like to keep you informed about similar sports or physical activity programmes. Please tick if you would like to receive these updates. | | | | | Yes 🞎 No 🞎 |
| Parent / Guardian Name |  | Date: | | |  | |