

Lancashire Sport Partnership

Course Booking Form



Please complete one form per person per course. Please note that confirmation of receipt of the booking form and course confirmation will be sent out by e-mail.

First Name: _____
Surname: _____
Contact Number: _____
Address: _____

Postcode: _____
E-Mail: _____
Club/ Organisation: _____
Position at Club: _____

- Coach
- Welfare Officer
- Volunteer Coordinator
- Administration/ Secretary
- Other _____

Accreditation
Number: _____

Course: _____
Date: _____
Venue: _____

Signed: _____
Date: _____

Please complete the form and return with payment to:

**Jeannine Barlow-Horne
Office 3-4 Farington House
Lancashire Business Park
Centurion Way
Leyland
PR26 6TW**

(E) Jbarlow-horne@lancashiresport.org.uk (T) 01772 299830