



go-ride

Developing the Next Generation of Cyclists

VELO CLUB LINCOLN

- Club Activity:** **Road Race Training Sessions**
Sessions will include, skills coaching, intervals and endurance training. Early season preparation for road and track riders!
- When:** **Saturday Mornings**
Starting 3rd January until 7th March 2009
(10 sessions)
- Time:** 10am – 12.00 noon
- Cost:** £1.00 per session
- Where:** Yarborough Leisure Centre, Riseholme Road, Lincoln. (Closed road cycle track)
- What to bring:** Road Bikes, Helmet, Drinks, Warm Clothing and Rain Coat. Food / Energy Bars
- Age range/ability level:** **The sessions will be aimed at experienced youth riders Youth B and above / U14/U16)**
- Booking:** **Limited number of places available:**
Please reserve a place by completing the attached form or email me your preferred dates.
- Contact details:** Cathy Morgan
cathy.timmorgan@btinternet.com
Tel: 07960 380074 / 01636 626247
- Address:** 74 Main Street, Claypole, Newark, Notts. NG23 5BA

TESCO



TREK



For more information Please Call: 0870 871 2000
British Cycling, National Cycling Centre, Stuart Street, Manchester, M11 4DQ

www.BRITISHCYCLING.org.uk



Velo Club Lincoln – Closed Road Coaching Sessions Consent Form

Registration and Parental Consent

I being the parent/guardian of _____ have read the information contained in this notice and hereby consent to my child taking part in the coaching sessions and understand and agree that my son/daughter participates in coaching sessions under instruction by British Cycling coaches entirely at his/her own risk. I have considered the nature of such sessions and have discussed them with my child. I am satisfied that my child is sufficiently responsible and competent to assume full and entire responsibility for his/her own safety under the supervision of a British Cycling coach.

Signed (Parent/Guardian): _____ Date: _____

Please can you provide the following information – it will be treated in the strictest of confidence – only the Club Coaches will have access to this information.

Riders Name			
Date of Birth		Age / Category	
Address			
Home Tel:			
Email Address			
	I would like to be kept informed of forthcoming events by email		YES / NO
Emergency Contact Details and Information			
1 st Emergency Contact Name / Relationship		Mobile No	
1 st Emergency Contact Name / Relationship		Mobile No	
Doctors Name		Phone Number	
Please give details of any allergies / medical conditions including e.g Asthma, food allergy etc..			

Signed Rider:

Print Name:

Date:

Velo Club Lincoln – Closed Road Coaching Sessions Booking Form

Please reserve me a place on the following dates:

Saturday (10.00 – 12.00)	√	£1.00 per session
3 rd January		
10 th		
17 th		
24 th		
31 st		
7 th February		
14 th		
21 st		
28 th		
March 7 th		
I wish to pay on the day		
I wish to pay in full in advance	Total Payable	£

Please return completed forms (with payment – if paying in advance) to:

Cathy Morgan, 74 Main Street, Claypole, Newark, Notts. NG23 5BA or

Email forms to cathy.timmorgan@btinternet.com