

TENNIS FOR KIDS - LTA PROGRAMME

Corbridge First School & Corbridge Tennis Club

I give permission for my child:

.....

(Please print full name)

to take part in the 6 week coaching programme at

Corbridge Tennis Club beginning Saturday 14 May 2016.

Parent's name:

(please print)

Parent's signature:

Telephone Number:

Email address:

Date:

**Permission slip to be returned to school office by 9.00am on
Wednesday 20 April 2016.**