

**FASKALLY COACHING WEEKEND
FRIDAY 15th to SUNDAY 17th OCTOBER 2004**

NAME OF CLUB

CLUB CONTACT NAME FOR CORRESPONDENCE

Address:

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.....

Tel. No: (w)

..... (h)

..... (m)

(Please indicate which contact number is preferable)

E.Mail address:

EIGHTS and/or FOURS (please indicate boats you will be taking)

Please indicate level of rowing e.g. 'N' Novice / 'I' Intermediate

Please print full names clearly

NAMES OF ROWERS/COXES

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In order that I can put together a timetable for the coaches, please advise the combination of the boats you will be using both days

Fee enclosed (£70 per person) £.....

(Please make cheques payable to The Scottish Amateur Rowing Association)

RECEIPT/INVOICE required YES/NO (please indicate)

I must have your completed form returned to me BY MONDAY 4TH OCTOBER in order that I can confirm our accommodation requirements etc.

All fees for the weekend MUST BE PAID IN FULL BY MONDAY 11th OCTOBER otherwise your place can not be guaranteed.