



WSRB/ESRB LEVEL 1 AWARD IN COACHING SQUASH

Learners applying for the WSRB/ESRB Level 1 Award in Coaching Squash should complete this form and return it to;

**Coach Education, Wales Squash and Racketball, Sport Wales National Centre,
Sophia Gardens CF11 9SW**

Please complete **all sections** as this information is required to register.

*Mandatory Field

LEARNER DETAILS

First Name*		Surname*	
Date of Birth*		Gender*	Male / Female
Address*			
Email*			
Home Tel Number*		Mobile Tel Number*	

ETHNICITY

Asian British Bangladeshi		Indian		Other White	
Asian British Indian		Mixed White and Asian		Pakistani	
Asian British Pakistani		Mixed White and Black African		Prefer Not To Say	
Bangladeshi		Mixed White and Black Caribbean		White British	
Black African		Other		White European	
Black British		Other Asian		White Non-European	
Black Caribbean		Other Black			
Chinese		Other Mixed Background			

DISABILITY

Do you consider yourself to have a disability? Yes / No / Prefer Not to Say

If yes, what is the nature of your disability (please tick as appropriate)?

Hearing		Multiple		Mobility		Other	
Learning		Visual		Physical		Prefer Not To Say	

DETAILS OF THE COURSE

ESRB Level 1 Award in Coaching Squash			
Dates of Course		Course Fee	£250.00
Venue			
Funding (Please state how the course will be funded)			

ADDITIONAL DETAILS

WSRB Member Number		Club	
Current Coaching Experience			
What Coaching do you intend to do in the future?			

PRE-REQUISITES (Confirm with tick/date/name where applicable)

At least 15 years or above	
If under 19 must have eyewear	
Hold either a WSRB Leaders & Teachers Award in Coaching Squash & Racketball Or a Squash Wales L1 Certificate in Coaching Squash	
I have/will undergo an Enhanced DBS check, free for WSRB members (not for U18 juniors)	
Be able to Communicate effectively in English (this includes listening, speaking, reading and writing)	
Have completed a minimum of feeding FH/BH coaching experience with a nominated support Coach/Player who is recognised by WSRB –PLEASE NAME COACH/PLAYER	
Be County Junior Standard	
Have evidence of attending a valid and recognised Safeguarding and Protecting Children and Vulnerable Adults workshop (or equivalent)	
I have/will pay the appropriate fee and any costs associated with complying with the above conditions	

DECLARATION

Signature*		Date*	
------------	--	-------	--