

Table Tennis England Coach Licence Scheme

Application Form — <u>BOTH SIDES OF THIS FORM MUST BE COMPLETED. FAILURE TO COMPLETE BOTH SIDES WILL RESULT IN YOUR APPLICATION BEING REJECTED. ALL QUESTIONS ARE MANDATORY.</u>

Valid until - 31ST July 2015

Personal Info	ormation (pl	ease compl	ete in block capitals)			
	First name			Last Name		
Initials		Title		Date of Birth		
Full Po	stal Address					
					Postcode:	
Tel No.				Mobile		
Work Tel.						
En	nail Address					
	Coach Registr	ration Numb	per			
Are you a NEWLY qualified UKCC L1? so, you're Licence is free				YES / NO)	
Declaration						
Licensed Table understand th	e Tennis Coac at failure to d paches with Ta	hes and coa lo so will res	ches are required to a sult in withdrawal of n	abide by and prom ny Coach Licence.	ected in the Code of Practice for lote the code in their work. I Please note the licence is only 4sport Level 1 Award in Coaching	
Signa	ature	Date:				
If you do not w may require a c		_		ite or pass on to o	other organisations/individuals who	
damage to the	Cover Limit of Indel legal costs a ir property.	mnity £10 n nd damage Also covers	nillion s awarded against yo		njury caused to any other person or ce, teaching methods, allegations of	

Personal Accident - Temporary Benefits: Limit of Indemnity £200 per week
Pays specified weekly benefits following accidental injury. This includes medical and dental expenses and physiotherapy treatment costs. Maximum benefit paid for up to 52 weeks but excluding first 14 days.

Personal Accident - Capital Benefits: Limit of Indemnity £50,000

Pays specified benefits following your accidental death or permanent disability.



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Legal Protection Scheme: Limit of Indemnity £25,000

Insures your legal costs and expenses, solicitors' fees and court costs arising our of Legal Defence, Bodily Injury,

Employment and Tax Disputes.

This Includes Legal Advice and Counselling Helplines.

Insurance Proposal Form

In addition to completion of the licence application form Towergate tlc require the following information to be provided, as a condition of cover for the Sports Liability, Personal Accident (Capital and Temporary Benefits) and

Legal Protection Cover.

Please read the Description of Cover summary (*previous page*) and complete the following questions and declaration, sign at the bottom and return this form to Table Tennis England.

Have you ma	de a claim under this or similar insurances within the past five years?					
Are you awa	are of any circumstances which may give rise to a claim in the future?					
Has any insurer ever	declined any proposal, terminated any insurance or required special terms of you?					
	Are you a paid coach earning £50,000 or more per annum?					
If you have answered Y sheet if necessary):	ES to any of the above questions please provide details below (please continue on a separate					
Declaration Declaration						
I declare to the best o rise to a claim.	f my knowledge and believe there are no known incidents or circumstances that might give					
Signature	Date:					
	GE OF 18 YOUR COACH LICENCE WILL ONLY BE VALID IF YOU ARE SUPERVISED BY ANOTHER TABLE					
	ED COACH (OVER THE AGE OF 18).					
	MUST HOLD A VALID DBS CHECK (WITHIN 3 YEARS) FOR YOUR COACH LICENCE APPLICATION TO BE S CHECK IS OUT OF DATE PLEASE APPLY FOR A NEW CHECK AT <u>www.online.tmgcrb.co.uk</u> IF UNDER 18					
THIS DOES NOT APPLY.						
Payment Details						
Amount Payab	£24.00					
Payment Metho	☐ Cheque ☐ Credit Card (Please make all cheques payable to the ETTA Ltd)					
Credit Card Payme	nt Details					
•	e emailing your credit card details, please either send them by post, fax or call the National Coaching					
Administrator. Please not	e that American Express and Diners Card are not accepted.					
	Card Type					
Valid From Date (if applicable)	/ Expiry Date / 3 Digit Security Number					
Name on Card	Signature					