



## ACTONIANS CRICKET CLUB JUNIOR INDOOR TRAINING BOOKING FORM - HARDBALL

Please complete for the sessions you wish to book and send your completed form by email (scanned) to Clifford Pile (clifford.pile@ntlworld.com). Payment to be made by bank transfer into the Actonians Junior Account: Old Actonians Association Cricket Club Colts Section; Barclays Bank Sort Code = 20-27-48; Account Number = 40149543 with the reference INDOOR/YOUR CHILDS NAME. Please confirm payment when emailing Clifford Pile your form.

## PLEASE ENSURE YOU COMPLETE THE CONTACT AND MEDICAL INFORMATION SECTIONS

DATE	TIME	NAME OF PLAYER
Saturday 4 <sup>th</sup> November 2023	3.00pm to 5.00pm	BOYS INDOOR LEAGUE TRAINING (Under 11 and Under 13)
Saturday 11 <sup>th</sup> November 2023	3.00pm to 5.00pm	
Saturday 18 <sup>th</sup> November 2023	3.00pm to 5.00pm	
Saturday 25 <sup>th</sup> November 2023	3.00pm to 5.00pm	
Saturday 2 <sup>nd</sup> December 2023	3.00pm to 5.00pm	
Saturday 9 <sup>th</sup> December 2023	3.00pm to 5.00pm	
Saturday 16 <sup>th</sup> December 2023	3.00pm to 5.00pm	
January 6 <sup>th</sup> January 2024	3.00pm to 5.00pm	
January 13 <sup>th</sup> January 2024	3.00pm to 5.00pm	
Saturday 20 <sup>th</sup> January 2024	3.00pm to 5.00pm	GIRLS INDOOR LEAGUE TRAINING (Under 11 and Under 13)
Saturday 27 <sup>th</sup> January 2024	3.00pm to 5.00pm	
Saturday 3 <sup>rd</sup> February 2024	3.00pm to 5.00pm	
Saturday 10 <sup>th</sup> February 2024	3.00pm to 5.00pm	
Saturday 17 <sup>th</sup> February 2024	3.00pm to 5.00pm	
Saturday 24 <sup>th</sup> February 2024	3.00pm to 5.00pm	
Saturday 2 <sup>nd</sup> March 2024	3.00pm to 5.00pm	
Saturday 9 <sup>th</sup> March 2024	3.00pm to 5.00pm	
Saturday 16 <sup>th</sup> March 2024	3.00pm to 5.00pm	
Saturday 23 <sup>rd</sup> March 2024	3.00pm to 5.00pm	
Saturday 30 <sup>th</sup> March 2024	3.00pm to 5.00pm	
Saturday 6 <sup>th</sup> April 2024	3.00pm to 5.00pm	TASTER SESSION

venue: Reynolds Sports Centre (Acton Ark Academy School), Gunnersbury Lane, Acton W3 &			
NUMBER OF SESSIONS BOOKED:	TOTAL: £	(£10.00 per session	





CONTACT INFORMATION				
Name of Parent/Guardian:				
Address:	Post Code:			
Home Tel Number:	Mobile/Emergency Number:			
Parents Email:				
MEDIC	AL INFORMATION			
Please detail any important medical or personal information that our coaches need to know in relation to your child's participation. Such as: allergies; medical conditions (e.g. Asthma etc.); any additional needs, and/or any injuries. Please indicate if you would like to discuss this privately with us				
Current medication/medication required:				