

# GDT

## WOODFORD PARK TENNIS

with the **GDT Team**

**Jan - March 2011**

**13 week courses**

**Starting: Tuesday 4<sup>th</sup> January**

**Ending: Sunday 10<sup>th</sup> April**

**Excluding: February Half Term Week (Mon 21<sup>st</sup> February – Sun 27<sup>th</sup> February)**

**Want to start?**

### BOOK A FREE ASSESSMENT

Not played since school?  
Played quite a lot?

Give us a call to arrange a  
FREE 15min Assessment

**0118 375 8324**

**BOOK ONLINE!**

### NEW GDT Online Booking System

No more filling in paper forms!  
Get immediate confirmation!

Register yourself & your family  
with GDT Online Booking.

[www.gdtonline.co.uk](http://www.gdtonline.co.uk)



4 outdoor tennis courts



Mini Tennis Coaching



Regular Competitions



Individual Tennis lessons



Indoor Mini Tennis Red Courts



GDT Talent ID Squads

**BOOK ONLINE**

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or call 0118 375 8324**

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DAY	EVENT	AGE	TIME	COACH	13 WK COURSE	VENUE
Mon	Mini Tennis Red/Orange Improvers	5-8yrs	4.30 – 5.30pm	Hayley	£60.00 (12 weeks)	INDOORS
Thurs	Mini Tennis Red Beginners /Improvers	5-8yrs	4.30 – 5.30pm	Hayley	£65.00	INDOORS
Thurs	Mini Tennis Orange	8-9yrs	5.30 – 6.30pm	Hayley	£65.00	OUTDOORS

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
<b>January</b>	3rd	4th	5th	6th	7th	8th	9th
	10th	11th	12th	13th	14th	15th	16th
	17th	18th	19th	20th	21st	22nd	23rd
	24th	25th	26th	27th	28th	29th	30th
<b>February</b>	31st	1st	2nd	3rd	4th	5th	6th
	7th	8th	9th	10th	11th	12th	13th
	14th	15th	16th	17th	18th	19th	20th
	21st	22nd	23rd	24th	25th	26th	27th
<b>March</b>	28th	1st	2nd	3rd	4th	5th	6th
	7th	8th	9th	10th	11th	12th	13th
	14th	15th	16th	17th	18th	19th	20th
	21st	22nd	23rd	24th	25th	26th	27th
<b>April</b>	28th	29th	30th	31st	1st	2nd	3rd
	4th	5th	6th	7th	8th	9th	10th

## Booking & Registration Form

Complete and send to: GDT, PO Box 3484, Wokingham, Berkshire, RG40 9BA  
Cheques payable to: GDT Berkshire

**Woodford Park**  
13 weeks Jan – March 2011

Course:

Day and time:

Full Name:

Age:  DOB:

Address:

Phone:

Mobile:

School:

Email:

Parents Name/s:

Does the player have any **medical conditions**, take any form of permanent or temporary **medication** or have any other considerations (physical or behavioural) that the coaches should be aware of. Please list any **allergies** (e.g. bee stings, nuts etc), **asthma**, **epilepsy**, **diabetes** or any other?

Do you give permission for your child to **walk / cycle home on their own** after their coaching session? Yes / No

Parent / Guardian Signature: (**compulsory field**)