

**BRITISH JUDO ASSOCIATION – NATIONAL COACHING COMMISSION
COACH EDUCATION COURSE LICENCE APPLICATION FORM**



COURSE TITLE			
COURSE VENUE			
COURSE DATE		COURSE TIME (From/To)	

ATD/TO/Organiser		BJA Licence Number	
Position Held		Date Appointed	
Address (inc. Postcode)			
Telephone No (Day)		(Evening)	

COURSE CONTENT :

CALENDAR INFORMATION: Please enter the course detailed above into the BJA Calendar of Events. If the section below is not completed it will be presumed that the event does not need to be entered onto the BJA Calendar of Events.

Contact name		Telephone number	
		E-mail address	
Further details to be entered	Closing date for applications: _____ Course Fee: _____ Fee payable to: _____ Return address for application slips: _____ _____ Course suitable for candidates seeking to gain BJA Kata Awards / Coach and Instructor Revalidation.		

I certify that I am familiar with the requirements of this level of BJA Coaching Course and that the event will be run in line with the requirements laid down in the BJA Coach Award Scheme Handbook in all respects. I recognise that I am responsible to the British Judo Association for ensuring the course is correctly delivered.

ATD/TO/Organiser signature		Date	
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When this form has been completed it should be sent with the fee of £20.00 to:
 BJA Coaching Administrator, British Judo Association, Suite B, Loughborough Technology Centre, Epinal Way, Loughborough, Leicestershire, LE11 3GE.
 This form should be mailed to arrive at The BJA Head Office **at least SIX weeks prior to the event.**
 Your Coaching Course Promotional literature should state "THIS IS A BRITISH JUDO ASSOCIATION LICENSED COACH EDUCATION COURSE"