



To: The Parent / Guardian

Re: (enter learner name)

Coaching Course Parental Consent Form

In order for the above named learner to attend an Amateur FA coaching course, you must provide consent for them to attend the course they have enrolled onto.

Please complete and sign the consent form on the following page and send it back via email on Sita.Srirangan@amateur-fa.com

Yours sincerely,

Sita Srirangan
Workforce Development Officer
Amateur Football Alliance
020 8733 2613 option 5



Parental Consent Form

Name of Coaching Course:

Start Date of Coaching Course:

Name of Learner:

Parents/Guardians Name:

Parents/Guardians Address:

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Parents/Guardians Contact Number:

Parents/Guardians Email Address:

Parents/Guardians Signature:

Date: