



# **British Aikido Board**

The Governing Body for Aikido in the U.K.

Recognised by Sport England as the only UK Aikido Governing Body

**Name:** .....

**Address:** .....

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**Post Code:** .....

**Tel No:** .....

**Association:** .....

**Grade + Grade Date:** .....

**Date of Birth:** .....

**Email:** .....

## **Coach Level 2 Unit Course(s)**

**Associations Authorisation**

You require the permission of your association to attend a coaching course.  
Your Association's Head (Principal Coach) or your Coaching Liaison Officer (CLO) **must** sign below.  
You must have current BAB approved Insurance to attend a BAB course

**Signed:** ..... **Dated:** .....

**Please print name:** ..... **Association Position:** .....

**Automatic Coaching course notification using your email address**

Email me at [coachingadmin@bab.org.uk](mailto:coachingadmin@bab.org.uk) adding 'Coaching Application' in the subject section of the email.  
Add your name and association in the body of the email.

BAB Course	Indicate here which course(s) you wish to attend	
Young People	Yes	No
Communication	Yes	No
Managing Risk	Yes	No
Practice, Skill and Techniques	Yes	No
Fit for Purpose	Yes	No

Application(s) can be made on the BAB website (preferred) or return this form to:  
**Mr Bob Salloway, 14 Honister Place, Stanmore, Middx. HA7 2EL**  
I will contact you when a course is available.

**Criteria**  
You must be at least 18 years of age