

Certificate Request Form



Please complete and return to Sports Leaders UK at the end of your course.

Organisation that purchased the resource pack

Name of Registered Organisation _____

Contact Name _____

Organisation Address _____

Postcode _____ Phone _____

Email _____

Where course was run (Name to be put onto certificates (i.e. Mill Hill Recreation Centre) if different from above)

Name of Organisation _____

Contact Name _____

Organisation Address _____

Postcode _____ Phone _____

Email _____

Where the certificates are to be sent (If different from above)

Name of Organisation _____

Organisation Address _____

Postcode _____

Number of certificates required *Gender of candidates M (number) F (number)

I can confirm that the course was delivered to the appropriate standards

I can confirm that all candidates are over the age of 16

Signed _____ Name _____

*Information for internal audit purposes only

Please return this form to:

SPORTS LEADERS UK

23-25 Linford Forum, Rockingham Drive, Linford Wood, Milton Keynes MK14 6LY

Click onto www.sportsleaders.org Email contact@sportsleaders.org Call us on 01908 689 180

DCCRQ
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