

National Field Archery Society

Assistant Coach Renewal

Photo (Note 1)

Title	Mr	Mrs	N	Viss		Ms	Othe	r				
Full Name												
Date of Birth												
House No or Name and Street												
City / Town / Village												
County												
Country								Post (Code			
Telephone Number Home												
Telephone Number Mobile												
Email Address												
Club Name(Note 2)												
How long have you been an active NFAS member ?				Year	rs		N	NFAS Nu	ımber			
Are you DBS (CRB) Approved (Note 5) Yes			No	10		Has DB	Has DBS been obtained via NFAS				No	
DBS (CRB) Disclosure number												
Disclosure Date				/		/						
	Are you registered with the DBS Online Update Service?				es	No						
\re you registered with the DBS Online Update	Service											
Are you registered with the DBS Online Update Do you give permission to view your DBS disclo				Ye		No						

Send to:

Mr C Cleaver - Coach Training Coordinator 20, Setting Stones Washington Tyne and Wear NE38 9EU

"National Field Archery Society and NFAS Ltd will process your data in accordance with the 2018 Data Protection Act. The information you provide will be used to maintain our membership / coaching records and administer field archery activities where membership information is required. Individual members details will not be shared with other organisations and data will not be sent outside the UK. For more information contact the Coach Training Co-ordinator".