



SW Talent Development Centre- Tier 1 Team Bath Athletic Development Group- Tier 2 Athlete Application Form

Name: _____ Sex: Male / Female

Height: _____ cm Weight: _____ Kg

Dominant hand: Left / Right

Sport: _____ Discipline (or playing position) _____

Name of Club: _____ Name of Coach: _____

Town club based in: _____ School attended: _____

Data Protection

The South West Regional Talent Centre is committed to protecting the privacy and confidentiality of its athletes. Any personal data that you are asked to provide will be held and processed in accordance with the requirements of the 1998 Data Protection Act. The South West Regional Talent Centre needs to process information about its athletes for administrative, sporting, and health and safety reasons in order to operate efficiently. By submitting any personal data, you are thereby giving your consent for that data to be held and processed for these purposes.

Please indicate that you have read and agree with this statement

Signature: _____ Date: _____

(If under 18, this must be signed by a Parent or Guardian)

**Please return this signed and completed form to:
SW Regional Talent Development Centre Coordinator, Dept of Sports Development and
Recreation, University of Bath, Bath, BA2 7AY**



South West Regional Talent Centre
Athlete Information Form
October 2011





Personal Information:

Address: _____

Postcode: _____

Phone Number: _____ Email address: _____

Date of Birth: _____

Place of Birth: _____

Are you a student at: ___ secondary school ___ college ___ university

Are you a State or Private sector student: ___ State ___ Private

Have you been identified by your school as either Talented or Gifted for sport? Yes / No

Do you currently access the Youth Sport Trust's Junior Athlete Education Programme? Yes / No

Do you or have you ever received Sport Aid funding? Yes / No

Are you on the TASS programme? Please give details _____

If you are at secondary school are you intending to apply to: ___ college ___ university





Does your child suffer from any of the following? If you answer YES to any of these please specify whether your child carries medication for this and, if so, what.

Illness/Impairment	Please tick	Other info/notes
Learning difficulties		
Asthma		
Allergies		
Diabetes		
Epilepsy		
Heart disease		
Physical impairment or mobility issues		
Other chronic illness (please specify)		

**Are there any other details regarding your child's health that you think we should be aware of?
Please write the details in the box below:**



Race/Ethnicity	Tick	Race/Ethnicity	Tick
White/British		Asian/British	
White Irish		Asian/Indian	
White/Other		Asian/Pakistani	
Black/British		Asian/Bangladeshi	
Black/African		Asian/Other	
Black/Caribbean		Chinese	
Black/Other		Mixed-White and Black Caribbean	
		Mixed-White and Black African	
		Mixed -White and Asian	
		Mixed-Other	
Other (Please specify)		Prefer not to say	

Required information

Do you give permission your child to be treated by a qualified first aider in an emergency?

YES / NO

Do you permit our organisation to publicise photographs on our activities that may include you or your child?

YES / NO



Current Training / Activity levels

Question 1: Have you had and kind of Strength and Conditioning support before?
YES/NO

If so, what type and for how long?
Type (eg weight training): _____
How long: _____

	Sport	Number of Months per year	Number of Days per week	Number of Hours per week
Primary Sport (i.e the one that nominated you for this programme)				
School sport / PE				
Informal play activity – ie playing street games				
Other sports				

Participation history

Question 1: Primary Sport – participation & training history

	Age
Age you first participated in your primary sport	
Age you began competing	
Age you began to train seriously for your primary sport	





Question 2: Competitive involvement – primary sport

	Age	What was that success?	Year achieved
Age you first achieved local success			
Age you first achieved regional success			
Age you first achieved national success (if applicable)			

Question 3: Before the age of 10 how many days a week did you participate in physical activity

At school (PE classes) _____

In a club or local authority programme _____

In school sport (lunch or after school) _____

Just playing informally with your friends _____

Question 4: What other sports did you participate in before the age of 14?

	Sport	Participated in between which ages?	How many days per week did you play this sport?	Number of hours per week of participation?	Did you compete?	Highest standard of competition achieved e.g. Recreational, school club, county, regional, national
EG	Swimming	7 – 11	5	10	Yes	Club
EG	Dance	4 – 14	2	4	No	Recreational
1						
2						
3						
4						
5						
6						





Question 5: Which other sports do you currently participate or compete in and what is the highest standard you have achieved in each of them (ie, recreational, club, county, England, GB)?

Sport	Participated in between which ages?	How many days per week do you play this sport?	Number of hours per week of participation? (Training & competition)	Do you play this sport competitively? Yes or no	Highest standard achieved? e.g recreational, school, club, county, regional, England, GB

Question 6: What are your most notable athletic achievements in the last 3 years in your primary sport?

Example

Achievement	Level (eg. Local, county, regional, national, international)	Year	Your age at the time
bronze Medal - SW regional championships	Regional	2005	14
selection to England team for UK school games	National	2007	16
Selection to GB junior programme / team	National	2007	16
Top 10 finish European junior championships	International	2008	17

Primary Sport

Achievement	Level (eg. Local, county, regional, national, international)	Year	Your age at the time





Question 7: Are there any notable achievements in any of the other sports you've played?

Achievement	Level (eg. Local, county, regional, national, international)	Year	Your age at the time

Family involvement in sport

Question 1 -- Siblings:

How many siblings do you have? Male _____ Female _____

Birth order: Are you the eldest, middle or youngest child in your family? (please circle)

If you are female are your male siblings: Older Yes / No
 Younger Yes / No

Do your siblings play competitive sport? Yes / No

Which sports do they play and to what standard? _____
 Notable achievements? _____

Question 2 -- Father:

Did your father play competitive sport? Yes / No

Which sport did he play? _____

What standard did he achieve: Club, County, Professional, National, International/ Olympian

Does he have any notable sporting achievements? _____

Does he still compete? Yes / No To what standard?

Question 3 -- Mother:

Did your mother play competitive sport? Yes / No





Which sport did she play? _____

What standard did she achieve: Club, County, Professional, National, International/ Olympian

Does he have any notable sporting achievements? _____

Does she still compete? Yes / No To what standard?

Question 4 - Other Relatives:

Do you have any relatives who are / were notable (elite athletes)? Yes / No

If so who are they and what sport did they play?

Are there any notable achievements?

Other

Question 1: Have you ever felt like quitting your sport? Yes / No

Please rate the following factors to indicate which of the following contributed most to making you want to discontinue your sport. (1 the lowest to 5 the highest)

- | | | |
|-------------------|--------------------------|--|
| 1...2...3...4...5 | <input type="checkbox"/> | Injury or illness |
| 1...2...3...4...5 | <input type="checkbox"/> | Time pressure |
| 1...2...3...4...5 | <input type="checkbox"/> | Lack of peer support |
| 1...2...3...4...5 | <input type="checkbox"/> | Parental Pressure |
| 1...2...3...4...5 | <input type="checkbox"/> | Financial Pressures |
| 1...2...3...4...5 | <input type="checkbox"/> | Conflict with other interests |
| 1...2...3...4...5 | <input type="checkbox"/> | Conflict with school work |
| 1...2...3...4...5 | <input type="checkbox"/> | Lack of fun |
| 1...2...3...4...5 | <input type="checkbox"/> | Family issues |
| 1...2...3...4...5 | <input type="checkbox"/> | Age |
| 1...2...3...4...5 | <input type="checkbox"/> | Too much focus on competition |
| 1...2...3...4...5 | <input type="checkbox"/> | Failure to improve skill |
| 1...2...3...4...5 | <input type="checkbox"/> | Failure to improve competition results |
| 1...2...3...4...5 | <input type="checkbox"/> | Discouraged by daily effort |
| 1...2...3...4...5 | <input type="checkbox"/> | Other (please specify) |





Coaching

Question 1: Which coaching qualities are most responsible for you progressing to your current performance standard (1 the least important to 5 highest)

- 1...2...3...4...5 ability to motivate / encourage
- 1...2...3...4...5 confident and relaxed style of coaching
- 1...2...3...4...5 strong insistence on perfection
- 1...2...3...4...5 teaching ability
- 1...2...3...4...5 detailed knowledge of the sport
- 1...2...3...4...5 stressing balance between life and sport skills
- 1...2...3...4...5 understanding of competition demands
- 1...2...3...4...5 took personal interest in me
- 1...2...3...4...5 coach did not contribute
- 1...2...3...4...5 other (please specify)

Question 2: Please rate (1 the least important to 5 highest) the qualities of a coach that are important to you.

- 1...2...3...4...5 Teaching ability
- 1...2...3...4...5 Skill competence
- 1...2...3...4...5 Training knowledge
- 1...2...3...4...5 Management and organizational skills
- 1...2...3...4...5 Ability to motivate or encourage
- 1...2...3...4...5 Strategic knowledge of the sport
- 1...2...3...4...5 Personality
- 1...2...3...4...5 Assistance with goal setting
- 1...2...3...4...5 Ability to help you achieve balance in life





Availability to Train

Please indicate below in the week schedule your availability to come to The Sports Training Village, Bath University to attend strength and conditioning sessions.

The program runs twice per week each session lasting 1 hour, insert the times showing your potential availability to attend sessions outside of your other commitments.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

