**British Taekwondo Council**

# Kevin Beddows

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| --- | --- |
| **Instructor requesting holiday cover** *(please print)* | |
| Name | Click or tap here to enter text. |
| Organisation | Click or tap here to enter text. |
| Registered Instructor No | Click or tap here to enter text. |
| Professional Indemnity No | Click or tap here to enter text. |
| Period of cover required (days) | Click or tap here to enter text. |
| Date from | Click or tap to enter a date. |
| Date to | Click or tap to enter a date. |
| email address | Click or tap here to enter text. |

**BTC TEMPORARY HOLIDAY INSURANCE COVER**

|  |  |
| --- | --- |
| **Person Providing Cover** *(please print)* | |
| Name | Click or tap here to enter text. |
| DOB | Click or tap to enter a date. |
| BTC Member Organisation | Click or tap here to enter text. |
| Grade | Click or tap here to enter text. |
| BTC Membership No | Click or tap here to enter text. |
| DBS Certificate No | Click or tap here to enter text. |
| DBS Date of Issue | Click or tap to enter a date.  ***Note: Copy of DBS Certificate to be forwarded with application*** |
| Have you completed a Basic Safeguarding Awareness Course within the last 3 years? | **Yes  No**  ***If yes, send copy of certificate with application*** |

**Applications must be made at least 21 days prior to holiday cover commencement.**

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| --- | --- | --- | --- | --- |
| Signed: |  | Registered Instructor | Date: | \_\_\_ / \_\_\_ / \_\_\_\_\_ |
| Signed: |  | Person Providing Cover | Date: | \_\_\_ / \_\_\_ / \_\_\_\_\_ |
| Approved By: |  | BTC Insurance Officer | Date: | \_\_\_ / \_\_\_ / \_\_\_\_\_ |

Registered Office: 18 MulberryAvenue, Turnstone Business Park, Widnes, Cheshire WA8 0WN

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