

## Private Instruction Request Form

## Please complete and submit form to reception or email to terryfoxathletic@ottawa.ca

Contact Inform	nation					
Name:						
Emergency Contac	+•					
			]			
Phone Number(s):	Second p	hone number				
Email:						
Availability - Indicate when you are available						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Morning	Morning	Morning	Morning	Morning	Morning
Afternoon	Afternoon	Afternoon	🗌 Afternoon	Afternoon	🗌 Afternoon	🗌 Afternoon
Evening	Evening	Evening	Evening	Evening	Evening	Evening
Private Instructor Preference						
Language: 🗌 English 📄 French						
Gender: 🗍 Female 📄 Male 🦳 No Preference						
Preferred Trainer: No Preference						
Goals						
🗌 Classic Ski		🗌 One-on-One	Small Group			
🔲 Skate Ski		Semi-Private	Other goa	al:		
For City Staff to complete						
Step 1: Please contact Private Instructor to inform them of new client request						
Staff Name:			Date of Call:		MSG Left	: /Spoke to PI
Step 2: Please follow up with Private Instructor to ensure they have contacted the client						
Staff Name:			Date of Call:		MSG Left	: /Spoke to Pl
Private Instructor (	PI) Reminder: Plea	ase file under your tab	and sign/date this	page when client ha	is been contacted.	
PI Name:	,	· · ·	ontacted: OYes			
Privacy Act R.S.O. 1	990, c. M.56. Pers nis collection and	der the authority of So onal information will use of your personal i <u>aletic@ottawa.ca</u>	be used by the City	for the purposes of	administering this p	rogram.