**ASP APPLICATION FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Discipline (K1, C1 etc.): |  |
| Email: |  | Age: |  |

|  |
| --- |
| **Please let us know you goals and why you would like to join the ASP programme (300 words max):** |
| *Guidance – applicants are measured against ASP carding criteria and their level of commitment.* |
|  |

|  |
| --- |
| **Please let us know about your current ability level (300 words max) \*:** |
| *Guidance – include any relevant competition results (position/score).*  |
|  |

\*If possible, please include links to training/competition performances.

|  |
| --- |
| **\*Please let us know what facilities/venues are available for your practice (200 words max):** |
| *Note – Help us understand the available time you have to train (what, where and when).*  |
|   |

Thanks for taking the time to apply.

**CLOSING DATE: 15st July 2020**