



# Private Instruction Request Form

Please complete and submit form to reception or email to [terryfoxathletic@ottawa.ca](mailto:terryfoxathletic@ottawa.ca)

## Contact Information

Name:

Emergency Contact:

Phone Number(s):      Second phone number

Email:

## Availability - Indicate when you are available

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning
<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon
<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> 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 goal:

## 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 PI

Private Instructor (PI) Reminder: Please file under your tab and sign/date this page when client has been contacted.

PI Name:       Client Contacted:    Yes    No      Signature:

Personal information is collected under the authority of Section 28(2) of the Municipal Freedom of Information and Protection of Privacy Act R.S.O. 1990, c. M.56. Personal information will be used by the City for the purposes of administering this program. Questions about this collection and use of your personal information may be directed to Recreation Supervisor, 2960 Riverside Dr., Ottawa, Ontario, K1P 1J1 [terryfoxathletic@ottawa.ca](mailto:terryfoxathletic@ottawa.ca)