

Horsham District Sports Development presents... Reaching Higher Rebound Therapy and Multi Sports Session



Rebound Therapy is accessible to all levels of disability

A fun session including Rebound Therapy/Trampolining and multi sports for 14-25 year olds. Rebound Therapy is used to facilitate movement, promote balance, and increase or decrease muscle tone depending on the level and intensity the bed is ridden. It encourages relaxation, promotes sensory integration, improves fitness and exercise tolerance, and develops communication skills. But most of all it is FUN.

Coach: Sharon Coomes plus trained and experienced support workers

Venue: QE11 School, Comptons Lane, Horsham, West Sussex, RH13 5NW

Disability parking onsite and the venue is wheelchair accessible

Dates: Thursday 11th January – Thursday 22nd march 2018 (excluding half term

on Thursday 15th February)

Times: 6.00pm – 7.30pm

Cost: £45.00 for the 10 week course (or LAC/Compass Card* rate of £35.00) if paid

in advance

If joining part way through, £5.50 / £4.50 LAC* per session

If payment for the whole term is problematic please speak to me in confidence * Leisure Access Card - a free card for Horsham district residents on a low income Compass Card – a leisure card for residents of West Sussex aged 0 – 25 with SEND

Info: Kim Roberts on 07715 320631 or kimberly.roberts@horsham.gov.uk

Booking: Booking must be done by returning the booking form overleaf with payment in

advance of the first session to: Kim Roberts, Horsham District Council,

Parkside, Chart Way, Horsham, West Sussex, RH12 1RL

NEEDS TO BE DONE BEFORE THE FIRST SESSION

Late bookings

If you have not booked a place by the first session please fill in the booking slip on the back of this form and return it with payment to the lead coach/practitioner at the first session.









| Reaching High | her Rebound Therapy (Adult) - Spring Te | erm 2018 |
|-------------------------------------|--|---------------------|
| Child's Name | Date of Birth | |
| | | |
| Postcode | School attended | |
| Tel Number (Home) | (Work) | |
| (Mobile) | Email address | |
| Relevant Medical/Disability Informa | ation (further information will be collected on an Act | tivity Registration |
| Amount enclosed (cheques to Horse | LAC card no | weeks |
| Does any family member and/or ca | arer intend to actively support/ play in the session? | YES - NO - |
| | | . |

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