



PACE COACH SESSION REPORT

1. (Required) Coach Name

2. (Required) Coaching Session (Please tick ONE option)

GC Foundation

GC Talent

AC Foundation

AC Talent

RC Foundation

RC Talent

GB Foundation

GB Talent

Other (Please specify)

3. (Required) Club Session Location

4. (Required) Date

___ / ___ / ___

5. (Required) Total Number of attendees

6. (Required) Number of attendees (female)

7. (Required) Number of attendees (male)

8. (Required) Number of attendees (other gender)

9. Notes about the session

Brief summary of what was covered: any variations on the standard presentation

10. Feedback from participants

Notes on verbal feedback, participation level etc

11. Any interest from participants in training as a coach/referee
