Triple T Sports Center

 619 E. Constance Rd. Suffolk, VA 23434 (757) 923-5150

 Request for Private Instruction

**Form must be submitted to the front office and approved prior to private being scheduled.** Gym Account and TPA Account (if team) must be current in order for private to be scheduled. After approval the coach will contact you to set up time.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class Day: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Class Coach(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for request (specific skill or problem area) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you discussed this issue with your coach? Yes / No

If yes, was Private suggested? Yes / No

Coach you are requesting? Tyrone / Dashea / Ashley /Kaitlyn / Derk /\_\_\_\_\_\_\_\_\_\_\_

Gym and TPA Accounts must be current for approval. Privates should always be done with your class coach first unless referred to another coach.

Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print please) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Prefer call or text? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

For office use only : Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Initial \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gym Account: Current / Balance Due: $\_\_\_\_ TPA Account: Current / Balance Due: $\_\_\_\_\_

Private is approved to be scheduled: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(TTT Office Staff)

Coach: If approved, contact to schedule private, then put this form in the Office folder, when payment is received fill in that information and put back in office folder. Thank you.

Private Schedule for Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time : \_\_\_\_\_\_\_\_\_\_

Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cost: \_\_\_\_\_\_\_\_\_\_

Paid: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_

Private Day / Time Approved \_\_\_\_\_\_\_\_\_\_\_ ( Tyrone/Cheryl Burks only)

Denied : (Reason)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_