

## BCU Level 1 Coach Session Planner

Coach: Supporting Coach: Date: Discipline: Venue: Length of Session: No. in group: Ability level: Age Range of Group: Risk Assessment and Local Operating Procedures Read: Yes <input type="checkbox"/> No <input type="checkbox"/> Parental Consent Forms Collected: Yes <input type="checkbox"/> No <input type="checkbox"/> Medical Declaration Forms Collected: Yes <input type="checkbox"/> No <input type="checkbox"/> Access Checked: Yes <input type="checkbox"/> No <input type="checkbox"/>
Medical needs: Individual needs: Coach equipment required: Equipment accessed from: Group equipment required: Safety equipment required:
Aim of session: Skills to be coached: List of objectives:
I have checked the session plan is in line with good practice: Yes <input type="checkbox"/> No <input type="checkbox"/>

<b>Content</b>	<b>Coaching points: I.D.E.A.S</b>	<b>Layout/ Organisation</b>	<b>Delivery Style</b>	<b>Time</b>
<b>Introduction</b> e.g. name, aim, safety etc	#####	#####	#####	#####
<b>Warm-up</b>				
<b>Preparatory Activities</b>				
<b>Skills/Activity</b>				
<b>Challenge for the Skill/Activity</b>				
<b>Summary</b> Identifying future coaching opportunities				

**Notes:**