

## Template 7

# Junior Player Consent Form Template

The safety and welfare of juniors in our care is paramount, and it is therefore important that we are aware of any illness, medical condition and other relevant health details so that their best interests are addressed.

Please complete this form with our assurance that the information will be treated as confidential.

It is the responsibility of the junior and their parent to notify the Club Safeguarding Officer or Secretary if any of the details change at any time.

### **To be completed by Parent/Guardian and Athlete**

Name of Child ("Athlete"): \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Name of Club \_\_\_\_\_

In the interest of your child, it is essential to know whether he or she suffers from any illness or medical condition. Please use this space to state, in confidence, any health or other matter concerning your child which the Club/County officials during these events only **should be aware of**, indicating any prescribed medication and the frequency of dosage.

.....  
.....

Child's Doctor's Name /Practice .....

Doctors Surgery Telephone No. ....

Please state if your child has a disability/communication difficulty that we **need to be aware of**? .....

Does your child have any specific dietary requirements? .....

Does your child have any allergies? .....

I/we agree to the Athlete taking part in Club/County activities and acknowledge that the Club/County will take all reasonable care of him/her. I/We understand that in the event of an accident or other emergency every effort will be made to contact me/us.

Contact Details of Parent/Guardian:

Name: ..... (Relationship to Child) .....

Contact No. ....

Name: ..... (Relationship to Child) .....

Contact No. ....

I/we agree to any medical treatment that my child may need being given in an emergency	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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I/we (Full name of Parent(s)/Guardian (s) ) ..... declare that I am / we are the person(s) having parental responsibility of the above child ("the Athlete").

## CODE OF CONDUCT FOR PARENT/GUARDIAN

Full name of Parent/Guardian \_\_\_\_\_

Will :-

- Remember that bowls is FUN
- Applaud effort and good play as well as success
- Appreciate good play by the opposition
- Encourage all players to respect the opposition, umpire, referee and other bowls officials
- Offer encouragement at all times
- Respect the umpire and referee's decisions

You should not:

- Enter onto the Green at any time
- Coach from the side but allow the assigned Coach/Team Manager to do their job
- Act in an offensive or insulting manner or use abusive language
- Show disrespect to the umpire, referee or other bowl's match officials

Signature of Parent/Guardian \_\_\_\_\_

Relationship e.g. (Mother) \_\_\_\_\_ Date: \_\_/\_\_/\_\_  
(dd/mm/yr)

## CODE OF CONDUCT FOR CHILD

Full name of Athlete \_\_\_\_\_

Will

- respect advice that you receive.
- treat others as you would wish to be treated yourself.
- respect all players regardless of their age, gender, ethnic background, disability, religious beliefs, sexual orientation, social background or physical characteristics.
- report anything which worries you.
- look out for yourself and for the welfare of others.
- speak out if you consider that you or others have been poorly treated.
- arrive on time and come ready to play.
- tell someone in authority if you are leaving a venue or competition.
- accept that these guidelines are in place for the well-being of all concerned.
- treat members and coaches with respect.
- observe instructions or restrictions required by appropriate members of staff.

Do Not:

- take part in any irresponsible, abusive, inappropriate or illegal behaviour.
- consume alcohol, illegal or performance-enhancing drugs, stimulants.
- use foul language.
- act disrespectfully to others in the public domain.
- Use social media inappropriately so as to offend or upset individuals.

Signature of Athlete \_\_\_\_\_ Date: \_\_/\_\_/\_\_