

JHYTA CONSENT FORM

To ensure we have the correct contact details for you, please fill out both sides of this form and give it back to a committee member when signing on for an event.

This form to be completed by parent/guardian before your child can participate in the club's activities

One form for each child/young person

Name of Child:.....

Date of birth:..... E-Mail Address:.....

Address:.....

Post Code:..... Tel:..... Mob:.....

Contact address if different from above:

.....

Post Code:..... Tel:..... mob:.....

I consent to my child taking part in the JHYTA Club activities at all the various selected venues. (Details of these are available at www.jhyta.co.uk "Event dates", I acknowledge that the Club will take all reasonable steps in the exercise of their duty of care to him / her from accident or other harm. I understand that in the event of an accident or other emergency every effort will be made to contact me. If unable to make contact, I consent to my child receiving urgent medical treatment, which in the opinion of a qualified medical practitioner may be necessary, including transportation to hospital, and accept that such practitioner will need to be informed of any relevant medical conditions.

Please Sign below

Parent:..... Child / Young Person:.....

During typical club activities photograph and video images may be taken of my child. I give my consent for this to happen and the images to be published.

NB: The images produced will be for use in the JHYTA website (WWW.JHYTA.CO.UK), and any other publication related to the promotion of JHYTA club activities. These photos will convey the best principles of respect and include only the various aspects of club activities and Trials Bike Riding. When considering the use of the images JHYTA will consider the best practice principles that are underpinned by the fact that the welfare of the child is paramount

Please Sign below

Parent:..... Child / Young Person:.....

Note: If you require information on our John Hagan Youth trials Academy activities, or have any concerns regarding your child's participation therein.

Please contact any member of the academy committee.

These records are for the use of JHYTA and will not be passed on to any other parties.

Anything written on this form will be held in confidence and used only for the purposes of your child being involved in JHYTA. Our coaches need to know these details in order to meet the specific needs of your child or young person.

Medical Details

Name of Doctor:.....Tel:.....

Address:.....

Childs Medical Number:.....

Allergies? YES / NO Please select as appropriate

If yes give details:.....

.....

Any relevant medical conditions / medication? YES / NO Please select as appropriate

If yes give details:.....

.....

Please provide any special dietary requirements and the type of pain/cold medication that may be given

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Parental Consent* (to be signed for competitors under 18 years)

I,.....(Name) Being parent/guardian of the above named child hereby give permission for the nominated club official/first aider to give the immediate authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son/daughter's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

If there are any changes to my child's health or medical conditions that are relevant to their participation in JHYTA activities I will inform the club children's officer

Signature:..... Date:

NB: Please note that a young person can give their own consent for medical treatment if they are over 16 years of age.

* Parental Consent is defined by the children (NI) Order 1995 Article 6 (i)

Natural mother always has parental responsibility.

Natural father gains parental responsibility;

If married to the mother at the time of birth or subsequently marries her

Through an agreement witnessed by solicitor or a Parental responsibility Order

Post 15 April 2002 if they jointly register the baby's birth.

(This consent form will remain valid for 1 year)