

Parent/Carer Consent Form for an Under 18 Bowls Player

The safety and welfare of children (under 18) in bowls is paramount. We encourage parents/carers to accompany children to formal and informal bowls events and activities. This additional supervision alongside that provided by bowls staff or volunteers is the best way to ensure they enjoy the sport. There may be occasions where parent/carer supervision is not possible and so it is important that we are aware of any illness, medical condition, learning difficulty or 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 player and their parent/carer to notify the Club Welfare/Safeguarding Officer or Secretary if any of the details change at any time.

To be completed by Parent/Carer and U18 Bowler

Name of Child _____ 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 bowls events/activities should be aware of, indicating any prescribed medication and the frequency of dosage.

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Child's Doctor's Name /Practice Surgery Telephone No.

Please state if your child has a disability/communication difficulty that we need to know.

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Does your child have any specific dietary requirements?

Does your child have any allergies?

I/we agree to 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/Carer:

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/No

I/we (Full name of Parent(s)/Carer(s))
declare that I am / we are the person(s) having parental responsibility of the above child.

Code of Conduct for Parent/Carer

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

Will 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/Carer _____

Relationship e.g. (Mother) _____ Date: ___/___/___ (dd/mm/yr)

Code of Conduct for Child

Full name of child _____

Will:

- respect advice that you receive,
- treat others as you would wish to be treated yourself,
- respect all players, coaches, volunteers and spectators regardless of their age, gender, ethnic background, disability, religious beliefs, sexual orientation, social background or physical characteristics,
- report anything which worries you looking 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,
- observe instructions or restrictions required by appropriate volunteers or members of staff.

Will 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 child _____ Date: ___/___/___