

PARENTAL CONSENT TO PARTICIPATE IN ARTISTIC ROLLER-SKATING ACTIVITIES

Private and confidential

All information will be treated as confidential and managed in accordance with relevant data protection legislation and guidance. You have a right of access to information held on you under the Data Protection Act 2018.

All parts of this form must be read and completed by parent/guardian and club official
CLUB NAME –
Part A – CHILD'S DETAILS
First Name: Middle Name/s:
Family Name:
Date of Birth: (Please state)
Parent/Guardian Name:
Address:
Post Code:
Telephone Number:
Parent /Guardian Email Address:

N.B. The Postcode **MUST** be completed

PART B – MEDICAL INFORMATION ABOUT YOUR CHILD

ARE THERE ANY MEDICAL CONDITIONS THAT SHOULD BE KNOWN ABOUT FOR YOUR CHILD WHICH
MAY AFFECT THEIR PARTICIPATION IN THE SPORT: Y/N* (IF YES PLEASE DETAIL BELOW)
IS YOUR CHILD PROVIDED WITH ANY SPECIAL MEDICATION OR EQUIPMENT FOR MEDICAL REASONS: Y/N* (IF YES PLEASE DETAIL BELOW)
IS YOUR CHILD ALLERGIC TO ANY MEDICATION THAT YOU ARE AWARE OF: Y/N* (IF YES PLEASE DETAIL BELOW)
I CONFIRM THAT THIS INFORMATION HAS BEEN BROUGHT TO THE ATTENTION OF A CLUB OFFICIAL:
NAME OF CLUB OFFICIAL:
SIGNED:
Date



PART C - PHOTOGRAPHY & SOCIAL MEDIA CONSENT

ABOVE-NAMED CHILD OR YOUNG PERSON DURING SKATING SESSIONS OR AT SKATING
COMPETITIONS. IF CONSENT IS GIVEN, I UNDERSTAND THAT IMAGES MAY BE USED ON SOCIAL MEDIA FOR BOTH THE ABOVE-NAMED CLUB AND BY GB SKATE ARTISTIC AND A FULL EXPLANATION OF THIS HAS BEEN
GIVEN BY THE CLUB OFFICIAL NAMED BELOW –
I/WE UNDERSTAND THAT OTHER CLUBS AFFILIATED TO GB SKATE ARTISTIC MAY USE PHOTOS ON THEIR SOCIAL MEDIA AND AGREE THAT I/ WE RAISE ANY CONCERNS WITH THE SAFEGUARDING
LEAD FOR THE ABOVE NAMED CLUB AND FOR THE OTHER AFFILIATED CLUB IF ANY OCCUR: IF YOU DO NOT GIVE PERMISSION FOR THE ABOVE, PLEASE ADVISE THE CLUB SAFEGUADING LEAD,
SO THAT THIS CAN BE MANAGED AT CLUB/GB SKATE EVENTS BY THE CLUB OFFICIALS
IF APPLICABLE - I CONFIRM THAT THIS INFORMATION HAS BEEN BROUGHT TO THE ATTENTION OF A CLUB OFFICAL:
NAME AND ROLE OF CLUB OFFICIAL:
SIGNED BY CLUB OFFICIAL:
Date:
I understand that I can change my consent at any time, by bringing this to the attention of a Club Official and submitted a new updated form with any required changes
SIGNED BY PARENT /GUARDIAN :
Date