***your sports Club***

Dear ***parent/gaurdian,***

On behalf of ***your sports Club*** I would like to welcome your child to the club and provide you with some information about our activities. The club provides opportunities for young people between the ages of ***eight (8)*** and ***Eighteen (18)*** to receive coaching and competition in Junior and Senior Cup & League Competition. All coaching is by qualified coaches who are trained and have been screened for their suitability for working with young people.

As a sports club, we are committed to providing high quality standards for all participants in relation to effective management, quality coaching and competition, and safety in sport. Our Club Welfare Officer, ***name here***, is responsible for ensuring that our safeguarding policy is implemented and can be contacted on ***contact number here*** should you have any concerns.

We welcome parents to all training and competitions and value your support. We are keen to involve parents in the club and would like to invite you to any training where you can meet club members, enjoy a cup of tea/coffee and find out more about the club. Below is some information about training times and dates, and details regarding travel arrangements, kit and club registration.

Training sessions take place on ***thursday*** at ***6 to 7 PM*** from ***15/09/17*** to ***25/05/18*** at ***YOUR SPORTS CLUB***.

Arrangements should be made for your child to travel to and from training sessions and matches. We appreciate it if children can arrive promptly and are collected promptly at the end of the session, if they are not making their own way home. If you are going to be late picking your child up, please contact ***name of coach/name of manager*** on 07123456789/07777777777 and let them know.

Club training kit consists of **shorts, training top, shingaurds and mouth gaurd**. The cost of each training session is £***2***. The club has a small membership fee of £***15*** and the chest size for their hoodie this should be paid by ***01/10/17***.

We would be grateful if you could complete the attached junior club membership form. For the safety of your child it is important that the club is informed of any medical condition or allergies that may be relevant, should your child fall ill or be involved in an accident while at the club.

If you would like to talk to someone at the club about this information or your child’s involvement with the club, please contact the Junior Coordinator, ***NAME HERE*** on ***07871677870***.

**SAFE IN CARE – NAME OF CLUB PARTNERSHIP WITH PARENTS**

**Parental Consent Form**

**NAME OF CLUB** values the involvement of children in our sport. We are committed to ensuring that all children have fun and stay safe whilst participating in **YOUR SPORT**

To help us fulfil our joint responsibilities for keeping children safe **NAME OF CLUB** has introduced Safe in Care Guidelines. These Guidelines tell you what you can expect from us when your child participates in **YOUR SPORT** and details the information we need from you to help us keep your child safe.

We need you to you complete this form at the start of every season and to let us know as soon as possible if any of the information changes. All information will be treated with sensitivity, respect and will only be shared with those who need to know. These include Team Manager, Lead Coach and Secretary.

**TRANSPORTATION OF CHILDREN**

I CONSENT / I DO NOT CONSENT (delete as appropriate) to my child being transported by persons representing **NAME OF CLUB** or one of its individual members or affiliated clubs for the purposes of taking part in Cricket.

I understand **NAME OF CLUB** will ask any person using a private vehicle to declare that they are properly licensed and insured and, in the case of a person who cannot so declare, will not permit that individual to transport children

**PHOTOGRAPHS AND PUBLICATIONS (Including Website)**

Your child may be photographed or filmed when participating in **NAME OF CLUB**. All reasonable steps will be taken to obtain parental consent In the absence of any explicit objection, those responsible will act in the best interests of the child which may include assuming parental agreement for the above reasons.

**I GIVE / DO NOT GIVE** (delete as appropriate) my permission for my child to be involved in photographing/filming and for information about my child to be used for the purposes stated in **NAME OF CLUB** Safe in Care Guidelines (Promotion, Performance Analysis, Reporting, etc)

I am aware of the Safe in Care Guidelines for cricket and agree to work in partnership with **NAME OF CLUB** to promote my child’s safe participation in Cricket.

I understand **NAME OF CLUB** will listen to the views of my child in relation to all matters affecting them and require respecting my child’s ability to give their own informed consent.

**Code of Conduct and Procedures – NAME OF CLUB activity**

A breach of the following will be deemed serious. The coaching staff will deal with any minor rules broken appropriately.

* Leaving of the sports/residential grounds without the organisers/coaches permission
* Causing deliberate damage or defacing any piece of furniture or equipment
* No female or male will be able to enter bedrooms / areas that host the opposite sex. Any part of the person beyond the point of the threshold will be deemed inside.
* Verbally abusing any participant, coach or any facility-centre-staff member.
* Physically abusing any participant or any other person at or around the facility.
* Taking of any form of alcohol or any illegal substances.
* Breaking of any curfew rulings that are clearly stated by Staff/Coaches/Volunteers, unless due to illness or use of any toilet
* Breaking of any curfew/quiet time ruling made by any staff/Coaches/Volunteers
* Breaking the rules set out by the Centre/Facility/Club.

Outline of Procedures to be followed:

Should there be a breach of any of the above the following steps will be taken to resolve the situation.

* Coaches/staff meeting to discuss incident
* Parents contacted regarding their child’s behavior and given opportunity to attend the meeting or have an independent representative attend
* Coaches representatives to meet with player(s) and have independent representation or parent present in a neutral location
* Coaches meet to action procedures
* Participant informed of outcome of meeting
* Parents informed by club of outcome.
* Organising of appropriate collection or drop off by camp organiser agreed by the parent or guardian.

**For copies of or information on the any of the club policy’s (listed below) please contact JUNIOR CO-ORDINATOR or CHILD PROTECTION OFFICER or WWW.YOURWEBSITE.COM**

* Code of Practice for Coaches
* Code of Expectation for Children & Parents
* Transport Policy
* Photography Policy
* Anti-bulling Policy
* Disciplinary Procedure

**MEDICAL INFORMATION**

Name of Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: H:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ W:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Emergency Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of General**

Practitioner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of GP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please complete the following details. If none, please state “none”.

Any pre-existing medical conditions that may affect the child’s participation in our sport?:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any dietary requirements, medication or treatment required:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any existing injuries (include when injury sustained and treatment received):

Allergies including allergies to medication:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENT/CARER STATEMENT**

I will inform the coaches of any important changes to my child’s health, medication or needs and also of any changes to our address or phone numbers given. In the event of illness, having parental responsibility for the above named child, I give permission for medical treatment to be administered where considered necessary by a nominated first aider, or by suitably qualified medical practitioners. If I cannot be contacted and my child should require emergency hospital treatment, I authorise a qualified medical practitioner to provide emergency treatment or medication.

**I have been made aware that GOVERNING BODY & CLUB NAME have developed a Safeguarding policy and they are commitment to ensuring the safety of my child by having:**

* A Coach’s Code of Conduct
* Clear Recruitment Policy which includes vetting all coaches and volunteers
* A Specific Policy for Transport, Photography, Anti-Bullying and Disciplinary Procedures
* A designated person for child protection

***NAME OF CLUB*** take your privacy seriously and will only use information gathered in relation to our youth teams that meets the specific responsibilities as set out in General Data Protection Regulations. However, from time to time we would like to contact you with details of fixtures, events, competitions and other information regarding the club. If you consent to us contacting you for these purposes please tick to say how you would like us to contact you

**Post** **Email** **Phone** **Text** **Via An App**

Our Secretary will store your information on our youth team’s data base for a maximum of 18 months unless re-registering.

We would also like to pass your details onto **NAME ORGANISATIONS/NGB/FUNDERS** for the purposes of monitoring and reporting along with applying for funding and development opportunities. If you consent to us passing on your details for this purpose please tick to confirm

**I AGREE** **I DO NOT AGREE**

I confirm that all details are correct to the best of my knowledge and I am able to give parental consent\* for my child to participate in and travel to all activities.

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Relationship to Child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Monitoring Form**

This section is not compulsory but does provide the club with important information.

**National identity**

What do you consider your national identity to be?

(E.g. Northern Irish, British, Irish, Scottish, Polish, Albanian etc)

**Ethnicity**

To which of these ethnic groups to you consider you belong?

(Please select the option that is most appropriate for you)

|  |  |
| --- | --- |
| 1. White  2. Chinese  3. Irish Traveler  4. Indian  5. Pakistani  6. Bangladeshi | 7. Black Caribbean  8. Black African  9. Black Other  10. Mixed Ethnic Group  Please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  11. Any Other Ethnic Group  Please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Community background**

Please indicate your community background by ticking the appropriate box.

|  |
| --- |
| 1. I am a member of the Protestant community  2. I am a member of the Roman Catholic community  3. I am member of neither the Protestant nor Roman Catholic community |

**DISABILITY**

***Disability or Medical Condition***

Do you consider yourself to have a disability or medical condition?

**Yes** **No**

If yes, what is the nature of your disability?

Physical Disability

Deaf or Hard of Hearing

Blind or Partially Sighted

Learning Disability

Other (please specify):

**Sporting information**

Have you played **YOUR SPORT** before? Yes No

If yes, where have you played the sport: (please indicate below)

Primary school

Secondary school

Local authority coaching session(s)

Club

Name of School/Club:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_