



Parental Consent & Data Protection Notice

Dear Parent/Guardian

Thank you for letting your daughter take part in activities promoted by the Bury Rounders League.

The League places priority on the safety and enjoyment of all players, officials and volunteers involved in the sport. At the Annual General Meeting, in November 2005, officials from every registered team in the League agreed to the development and implementation of good practice and child protection policies to ensure that every child who participants can do so in a fun, safe environment, and be protected from harm.

As a parent/guardian it is also important that you are aware of the rules that govern how the game is played. A copy of the Rules of the League and Good Practice & Child Protection Policies can be obtained from the League Secretary and/or the League's website.

In order to ensure that The League is taking reasonable steps to establish a safe environment where young people can enjoy developing their skills, it is necessary to obtain your consent for your daughter/ward to take part in activities promoted by the Bury Rounders League. Please complete the Parental Consent and Data Protection Programme Notice overleaf and return to the Team Secretary/Team Captain responsible for your daughter/ward's team activities.

I being the parent/guardian of _____ hereby consent to my daughter/ward taking part in the activities promoted by Bury Rounders League and understand and agree that she participates in the activities entirely at her own risk.

I have considered the nature of such activities, including the Rules of the League and Laws of the Game, as outlined in the Official Rule and Fixture Book, and have discussed them with my daughter/ward. I am satisfied that she is sufficiently responsible and competent to assume full and entire responsibility for her own safety under the supervision of the Team Secretary/Team Captain.

Signed (Parent/Guardian): _____ Date: _____



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PARTICIPANT'S DETAILS:

Name: _____ Date of Birth: _____

Team Name: _____

Address: _____

Home Tel: _____

Emergency Contact Details

Name: _____

Relationship to Participant: _____

Contact Tel Number: _____

Please make a note of any medical conditions you feel we need to know about below. If you have any concerns about your child participating in any form of physical activity then please consult you GP before giving permission for your child to take part.

Please ensure that the completed form is returned to the Team Secretary/Team Captain responsible for your child's activities, who will retain this information in a confidential filing system.