

Parental Consent Form – Girls Taster Sessions

Which session? (Please tick)

- Exmouth (Monday 2nd November)
Exeter (Tuesday 3rd November)
Newton Abbot (Friday 6th November)
Tiverton (Monday 9th November)
Torquay (Tuesday 10th November)
Feniton (Sunday 15th November)
Ashburton (Wednesday 18th November)
Paignton (Saturday 21st November)



PERSONAL DETAILS

Name of Player: _____ Age: _____ DOB: _____

Club/School: _____ School Year: _____

Address: _____

_____ Post Code: _____

Home Tel No: _____ Mobile: _____

Email: _____ Please tick if email is used regularly

FIRST-AID & TREATMENT OF SPORTS INJURIES

I give consent for the FA/FA equivalent qualified staff present to administer appropriate First-Aid in the event of injury to my child during training or matches. I also agree that I will inform the relevant coaching/event staff of any specific medical requirements that may affect the type of treatment administered either on the pitch or in a nearby hospital (e.g. allergies, Asthma).

Medical Requirements: _____

PHOTOGRAPHY & FILMING

I also give consent for my child to be photographed whilst playing at the football taster sessions, with appropriate images/filming being used solely for promotional and/or coaching purposes. (All parents and members of the media wishing to take photographs will be asked to give their name and contact details at each individual event, upon which they will be given an identification badge.)

Loco Parentis

In the case of a serious accident or illness, do you give your permission for us to act in “loco parentis” e.g. taking your child to hospital and giving permission for treatment?

Name (in capitals): _____

Emergency contact Tel. No. (If different from above): _____

Please add name & relation: _____
(Work – Friend – neighbour?)

Signed: _____ (Parent/guardian) Date: _____

Please complete and return to Mark Young at Devon County FA, Coach Road,
Newton Abbot, TQ121EJ. Tel: 01626 325919 Mob: 07973312146 Fax: 01626336814
mark.young@devonfa.com