



Super Sports Camps – Parental Consent Form

Player details

Player's Full Name:..... Male / Female
Age:..... Year Group:..... Date of Birth:.....
School:..... Sports Club/s (if any):.....
Playing History:.....
.....

Parent/Guardian details

Full Name:..... Relation to Player:.....
Email:.....
Emergency Contact Number:.....
Secondary Emergency Contact Number:.....

Medical Consent

Does your child have any medical conditions we need to be aware of? **Yes / No**
If yes, please give details:.....

Does your child need to bring any medication with them? **Yes / No**
If yes, please give details:.....

Is there anything else we should be aware of to ensure your child's wellbeing? **Yes / No**
If yes, please give details:.....

Name and telephone number of GP:.....

I am pleased to allow my son/daughter to participate in Super Sports Camps. I consider my son/daughter to be physically fit and capable of full participation, but in the event that they should be injured when I am not present, I give my permission for the manager/coach to obtain emergency medical treatment on their behalf.

Signature of Parent/Guardian:..... **Date:**.....



General Consents

I agree to my son/daughter taking part in the coaching and games activities organised by Super Sports Camps. I understand that the Camp cannot take responsibility for my child when he/she is not within the bounds of the venue.

I understand that each child should have available to wear a fitted gum shield, shin pads, and protective equipment required to participate, and that it is not the responsibility of the organisers to provide such equipment.

I will ensure that I notify the camp of any changes in circumstances which will affect my child's participation in Super Sports Camps.

Signature of Parent/Guardian:.....**Date:**.....

Photographic Consent

Photographs may be taken for publicity material such as newsletters, web site updates, promotional displays and promotional video.

Please tick the box if you **DO NOT** grant Super Sports Camps the absolute right to use images from photography taken during the Camp's activities for all general publicity purposes:

Signature of Parent/Guardian:.....**Date:**.....

Please ensure your son/daughter brings with them:

- ✓ Appropriate playing kit
- ✓ Protective equipment (gum shield, shin pads etc.)
- ✓ Packed lunch
- ✓ Water bottle
- ✓ Waterproofs
- ✓ Sun cream

Super Sports Camps Venue:

Solihull School
793 Warwick Rd,
Solihull
B91 3DJ

More information can be found on our website: www.supersportscamps.co.uk

Any further queries please contact:

Email: info@supersportscamps.co.uk

Tel No.: 07871513419

Data Protection Act 1998 – The information you have provided will be held by the Camp on a database and will only be used by the Camp committee members in order to contact you or your child.