



Parental /Carer's Consent Form

All parents /carers must complete this Parental /Carer's Consent Form for any child /young person under the age of 18 who wishes to join Bearbrook Running and Triathlon Club (BRTC) and participate in any club activities. Please ensure all sections of the form are completed clearly and in full and emailed to bearbrookrunningclub@gmail.com or handed to a club activity /run leader before your child /young person attends their first activity. We cannot allow the child / young person to participate in a club activity until this form has been completed and submitted.

If you have any queries about this form please email bearbrookrunningclub@gmail.com or speak to a club activity /run leader.

Child /Young Person Details

| | |
|---------------|--|
| First name | |
| Surname | |
| Gender | |
| Date of birth | |
| Home address | |

Medical Information about your child /young person

Please read each question carefully and answer every question honestly, if answering yes, please give details:

| Medical notification | Response |
|--|-------------|
| 1 Does your child have any pre-existing medical conditions? | (Yes or No) |
| 2 Does your child have a respiratory condition? | (Yes or No) |
| 3 When doing physical activity does your child experience any pain or tightness in your chest? | (Yes or No) |
| 4 Does your child lose balance or consciousness because of dizziness or light headedness? | (Yes or No) |
| 5 Does your child have a joint or bone condition or problem? | (Yes or No) |

| Medical notification | Response |
|--|------------------|
| 6 Is your child pregnant or post-partum? | (Yes, No or N/A) |
| 7 Is your child allergic to any medication? | (Yes or No) |
| 8 When did your child last have a tetanus injection? | |

Parent / Carer Details

The parent /carer will be contacted in case of queries /emergencies concerning the child / young person.

| | |
|--|--|
| First name | |
| Surname | |
| Gender | |
| Date of birth | |
| Home address (if same as child /young person, please state 'AS CHILD') | |
| Email address | |
| Home phone number | |
| Mobile phone number | |
| Work phone number | |

Details of Alternative Emergency Contact

| | |
|-------------------------------|--|
| First name | |
| Surname | |
| Relationship to parent /carer | |
| Contact phone number | |

Photography / Recorded Images

Bearbrook Running and Triathlon Club recognises the need to ensure the welfare and safety of all children / young people in athletics and triathlon.

In accordance with the UK Athletics child protection policy and procedures, we will not permit photographs, video, or other images of children / young people to be taken without the consent of the parents and children / young people. Bearbrook Running and Triathlon Club follows the UK Athletics Photographic Policy and Guidance for Athletics Clubs and Venues available here <https://www.uka.org.uk/wp-content/uploads/2023/03/Photographic-Policy-Guidance-for-Athletics-Clubs-and-Venues.pdf>

Bearbrook Running and Triathlon Club will take all possible steps to ensure all images are used solely for the purposes they are intended. If you become aware that these images are being used inappropriately you should inform a club run leader and email bearbrookrunningclub@gmail.com immediately.

| | | | |
|--|--|------|--|
| Parental /carer's consent for photography /recorded images | | | |
| As the parent /carer, I consent for Bearbrook Running and Triathlon Club or a photographer appointed by the Club photographing or videoing my child's involvement in athletics whilst participating in club activities for the purposes of publicising and promoting the club or sport, or as a coaching aid. | | | |
| Signed | | Date | |
| Full Name (Capitals) | | | |
| Child /young person consent for photography /recorded images | | | |
| As the child /young person joining the club, I consent for Bearbrook Running and Triathlon Club or a photographer appointed by the Club photographing or videoing my involvement in athletics whilst participating in club activities for the purposes of publicising and promoting the club or sport, or as a coaching aid. | | | |
| Signed | | Date | |
| Full Name (Capitals) | | | |

Parental /Carer's Consent

Medical consent – By signing this Parental /Carer's Consent Form you give your consent for your child /young person to be given medical treatment if required in accordance with the recommendation of a suitable qualified medical practitioner. You also understand that in an emergency all reasonable steps will be taken to contact the next of kin identified on this form.

Medical condition / notification – As the parent /carer of the child /young person joining Bearbrook Running and Triathlon Club and signing this Parental /Carer's Consent Form, you agree to inform a club activity /run leader of any significant changes in existing medical conditions or any new condition / injury that may impact on the child whilst participating in any activities led by the club.

Data protection – By signing this Parental /Carer's Consent Form you agree for Bearbrook Running and Triathlon Club to use your data for the purposes of your child's /young person's involvement in the club's activities and to contact you on any club related matters.

The following link contains Bearbrook Running and Triathlon Club's policy on the personal information we collect about you [Privacy Notice](#).

| | | | |
|--|--|------|--|
| I agree to (child's /young person's name) _____ | | | |
| taking part in activities organised by Bearbrook Running and Triathlon Club. I acknowledge the | | | |
| need for (child's / young person's name) _____ to | | | |
| behave responsibly. | | | |
| Signed | | Date | |
| Full Name (Capitals) | | | |