

GREENOCK CRICKET/HOCKEY CLUB

PARTNERSHIP WITH PARENTS

EMERGENCY CONTACTS/MEDICAL CONSENT

Please provide the following information, in order that Greenock Cricket/Hockey Club coaches have the necessary details to make the appropriate contact in an emergency. This information is requested to ensure the health and well being of all junior members. The information contained in this form is confidential and will only be used to safeguard members.

Member

Members Full Name.....

Date of Birth.....

Address.....

Tel No..... E-Mail.....

Transportation of Junior Members

I consent / do not consent to my child being transported by persons representing Greenock Cricket/Hockey Club or one of its individual members or affiliated clubs for the purposes of taking part in Cricket/Hockey.

I understand Greenock Cricket/Hockey Club will ask any person using a private vehicle to declare that they are properly licensed and insured. In the case of a person who cannot so declare, they will not be permitted to transport children.

Signed..... Date.....

Photographs and Publications (Including Website)

Your child may be photographed or filmed when participating in Greenock Cricket/Hockey Club activities. 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 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 Greenock Cricket/Hockey Child Protection Policy (available on Greenock Cricket Club website, www.greenockcricketclub.com)

Signed..... Date.....

I am aware of the Safe in Care Guidelines for Greenock Cricket/Hockey Club and agree to work in partnership with them to promote my child's safe participation in Cricket/Hockey.

I understand Greenock Cricket/Hockey Club will listen to the views of my child in relation to all matters affecting them and require to respect my child's ability to give their own informed consent.

Parent's Signature..... Date.....

Greenock Cricket/Hockey Club Representative

..... Date.....

Code of Conduct and Procedures

Parent/Guardian Agreement

Iparent/guardian ofagree to the code of conduct that is set out by Greenock Cricket/Hockey Club for their activity. I understand the procedures and the outcomes involved and I am in agreement that these procedures should be carried out.

Signed..... Date.....

Child Agreement

I agree to abide by the rules set out by Greenock Cricket/Hockey Club for their activity and I am aware that any breach of this code will incur action taken by the appropriate agencies.

Signed..... Date.....

Code of Conduct and Procedures of Greenock Cricket/Hockey Club

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, unless due to illness or use of any toilet

- Breaking of any curfew/quiet time ruling made by any staff.
- Breaking the rules set out by the centre.

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 behaviour 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 coaches/camp organisers of outcome.
- Organising of appropriate collection or drop off by camp organiser agreed by the parent or guardian.

Emergency Contacts

Name.....

Address.....

Relationship.....

Tel No H.....W.....M.....

Name.....

Address.....

Relationship.....

Tel No H.....W.....M.....

Name.....

Address.....

Relationship.....

Tel No H.....W.....M.....

Medical Consent

Family Doctor Name.....

Address

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Tel No.....

Please provide details of any pre-existing medical condition that may affect the participation of the above named Junior Member in Cricket/Hockey.

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Please provide details of any medication or treatment required.

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Has he/she any allergies and is he/she allergic to any medication?

If YES, please specify.....

Has he/she received a tetanus injection in the last five years?

YES/NO Approximate date.....

DECLARATION

I undertake to inform the appropriate team coach, as soon as reasonably practical, of any changes in the emergency contact details provided and of any change in the medical circumstances of..... (insert name of child).

I agree to.....(insert name of child) receiving emergency treatment, including anaesthetic, as considered necessary by the medical authorities present.

Signed.....

Date.....