

# PARENT CONSENT AND CODE OF CONDUCT AGREEMENT – Pleasley Vale - Friday 8/9/2017



PLEASE WRITE CLEARLY IN INK

## Participant Details

Name of participant:

Address:

Type of activity being undertaken:

Postcode:

Contact telephone number  
including STD code:

Age of participant:  
\_\_\_\_\_ years

Date of birth  
of participant:    \_\_\_ / \_\_\_ / \_\_\_  
                          day    month    year

## Details of Person to Contact in an Emergency

Name:

What is the relationship with the participant  
e.g. Mother, Father,  
Grandparent.

Address if different from that already given:

Emergency contact number (s)

Home:

Work:

Mobile:

## Medical Information

Please list any medical conditions, allergies or disabilities that we should be aware of. List any medication needed and ensure participants have correct medication and equipment with them. e.g. inhalers.

## Photographs

Occasionally photographs of council leisure sessions may be taken for the purposes of general publicity by authorised staff. If you do not consent to photographs being used in this way then please put a cross in the box opposite.

No

## Data Protection

We need your permission to use this information to enable us to make sure that our services are delivered on an equal basis to all sections of the community. This may mean that from time to time we need to share this information with other bodies for monitoring purposes.

If you do not wish the information you provide to be used in this way then please put a cross in the box opposite.

No

## Registration and Collection

All participants must be checked in and out of every session on the scheme register. Failure to comply with this requirement may result in exclusion from future sessions. If parents or legal guardians intend to drop off and collect their child then they must make themselves known to staff. Parents and legal guardians can consent to their child signing themselves in and out of sessions or for collection by a third party e.g. grandparent or neighbour. Parents or legal guardians have responsibility for notifying the coach if their child is unable to attend a session. **Parents or legal guardians must accompany and supervise children under 9 years of age for the duration of the session unless otherwise stated.**

The council does not accept responsibility for participants until they have been properly signed in and we will ensure that no child is left alone at a venue once the session has ended. No child will be allowed to leave sessions unless the proper authorisation has been granted by the parent or legal guardian. However anyone who leaves against the express wishes of our staff does so at their own risk. In such circumstances parents or legal guardians of the person leaving will be notified immediately.

## Behaviour

Once a session starts, and for the full duration of the session, only Council coaching staff and course participants may enter the playing/coaching area.

Family members may attend sessions as spectators, but they must not attempt to make contact with their or any other children, or take any action to distract them, unless there is an emergency situation or they have been instructed to do so by coaching staff. Parents or legal guardians should likewise inform their children that they should not attempt to make any contact with family members during the session. Family members and participants should exercise the principles of fair play, tolerance and respect at all times.

The Council reserves the right to exclude or refuse admission to any participant from any course or session on the grounds of disruptive, discriminatory, offensive or violent behaviour or actions that may be considered to be a danger to themselves, staff or other participants.

We welcome your constructive comments about our sports, arts and leisure sessions, either at the end of the session or by making an appointment with the coach/instructor at a convenient time.

## Child Protection

Bolsover District Council operates a Child Protection Policy, if you have any concerns about any of our sessions then please contact the Head of Leisure on 01246 242320

## FOR SIGNATURE

### Emergency Treatment Consent (Compulsory)

I, \_\_\_\_\_, of \_\_\_\_\_ Council. I consent to my child receiving emergency medical treatment, on the understanding that I am contacted as soon as is reasonably possible.

Signed: \_\_\_\_\_

### Self-registration & Release Consent (Optional)

I give permission for my child to register and release themselves at the start and end of each session.

Signed: \_\_\_\_\_

### Collection by Third Party (Optional)

I give permission for my child to be collected by the person named below.

Signed: \_\_\_\_\_

Print full name of authorised person: \_\_\_\_\_

### Declaration (Compulsory)

I have read and understood this Parent Consent and Code of Conduct Agreement and will abide by it:

Signed: \_\_\_\_\_

Print full name: \_\_\_\_\_