**English Indoor Bowling Association Ltd**

David Cornwell House, Bowling Green, Melton Mowbray, Leicestershire LE13 0FA

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**CONSENT FORM FOR PARENT/GUARDIAN**

**OF CHILD (ATHLETE) UNDER THE AGE OF 18**

**For the period 1st September 2022 until 31st August 2023.**

*To be completed by Parent/Guardian and Athlete*

Name of Child (“Athlete”): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Club \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the interest of your child, it is essential to know whether he or she suffers from any illness or medical condition. Please use this space to state, in confidence, any health or other matter concerning your child which the EIBA officials during these events only **should be aware of,** indicating any prescribed medication and the frequency of dosage. ………………………………………………………………………………………………………………………………………

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………………………………………………………………………………………………………………………………………

Child's Doctor’s Name /Practice ....................................................................................................................................

Doctors Surgery Telephone No. ...................................................................................................................................

Please state if your child has a disability/communication difficulty that we need to be aware of?

………………………………………………………………………………………………………………………………………

Does your child have any specific dietary requirements? …………………………………………………………………...

Does your child have any allergies? …………………………………………………………………………………………...

I agree to the Athlete taking part in EIBA Ltd activities and acknowledge that the EIBA Ltd will take all reasonable care of him/her. I understand that in the event of an accident or other emergency every effort will be made to contact me on my emergency number which is …Mobile No. or Home No. ……….

|  |  |  |
| --- | --- | --- |
| If unable to make contact with me, I agree to any medical treatment that my child may need being given in an emergency. | **YES** | **NO** |

**General Data Protection Regulation (GDPR)**

EIBA Approved Photographs, Live Streaming, Videoing and Television Broadcasting may be used on EIBA/IIBC/BIIBC websites, in the EIBA Ltd Yearbook, EIBA Newsletter, any social media operated by the EIBA (currently Twitter, Facebook and Instagram), promotional literature and other bowls publications such as Bowls International and EIBA National Finals Programmes along with your child’s name and bowls club. These images will convey the best principles and aspects of bowls.

Full details of the EIBA Privacy Notice can be downloaded at [www.eiba.co.uk/privacy/privacy-notice.pdf](http://www.eiba.co.uk/privacy/privacy-notice.pdf)

|  |  |  |
| --- | --- | --- |
| I consent for my child’s photographs and recorded images being taken for the purposes listed above in addition to their name and club name being mentioned. | **YES** | **NO** |

**Anti-Doping Procedures**

It may be necessary for your child to be tested for sport enhancing drugs. You must advise us if you have any objection to such a test. Please read the EIBA Anti-Doping Guidance Notes on our EIBA website [www.eiba.co.uk/Guidance/anti-doping.pdf](http://www.eiba.co.uk/Guidance/anti-doping.pdf)

*Further Information can be found at:*

UK Anti-Doping website – [www.ukad.org.uk/athletes/athletes-rights-and-responsibilities](http://www.ukad.org.uk/athletes/athletes-rights-and-responsibilities)

Safeguarding - [www.safeguardingbowls.org/](http://www.safeguardingbowls.org/)

I (Full name of Parent/Guardian) …………………………………………………………………declare that I am the person having parental responsibility of the above child (“the Athlete”).

**PTO** 

**CODE OF CONDUCT FOR PARENT/GUARDIAN**

Full name of Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will :-

* Remember that bowls is FUN
* Applaud effort and good play as well as success
* Appreciate good play by the opposition
* Encourage all players to respect the opposition, umpire, referee and other bowls officials
* Offer encouragement at all times
* Respect the umpire and referees decisions

You should not:

* Enter onto the Green at any time
* Coach from the side but allow the assigned Coach/Team Manager to do their job
* Act in an offensive or insulting manner or use abusive language
* Show disrespect to the umpire, referee or other bowls match officials

Signature of Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship e.g. (Mother) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_/\_\_/\_\_ (dd/mm/yr)

**CODE OF CONDUCT FOR CHILD**

Full name of Athlete \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will

* respect advice that you receive.
* treat others as you would wish to be treated yourself.
* respect all players regardless of their age, gender, ethnic background, disability, religious beliefs, sexual orientation, social background or physical characteristics.
* report anything which worries you.
* look out for yourself and for the welfare of others.
* speak out if you consider that you or others have been poorly treated.
* arrive on time and come ready to play.
* tell someone in authority if you are leaving a venue or competition.
* accept that these guidelines are in place for the well-being of all concerned.
* treat members and coaches with respect.
* observe instructions or restrictions required by appropriate members of staff.

Do Not:

* take part in any irresponsible, abusive, inappropriate or illegal behaviour.
* consume alcohol, illegal or performance-enhancing drugs, stimulants.
* use foul language.
* act disrespectfully to others in the public domain.
* Use social media inappropriately so as to offend or upset individuals.

Signature of Athlete \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_/\_\_/\_\_ (dd/mm/yr)

*Please note:*

*If you require further information regarding EIBA/IIBC/BIIBC activities, or have any concerns regarding your child's participation, please contact Peter Thompson (EIBA Chief Executive)*

*For GDPR matters please contact Stephen Rodwell (EIBA Data Protection Manager)*