

### **Junior (Under 18) Parental Form**

The safety and welfare of juniors at our championships is paramount.

It is important that we have record of the contact details below and of any illness, medical condition and other relevant health details relating to the junior so that their best interests are addressed.

Please complete this form with our assurance that the information will be treated as confidential.

It is the responsibility of the junior and their parent to notify England Golf Championship Department if any of the details change at any time.

<b>Junior Name:</b>	
Date of Birth	
Address	
Telephone Number	
<b>Parent/ Guardian Name:</b>	
Address (if different to Junior's address)	
Home Telephone No.	
Mobile Telephone No.	
Work Telephone No.	
<b>Emergency Contact Name</b> (if different to Parent/ Guardian):	
Relationship to Junior	
Home Telephone No.	
Mobile Telephone No.	
Work Telephone No.	

### Medical Information

Doctor's Name	
<b>Doctor's Surgery Address</b>	
Telephone No.	

Does your child experience any conditions requiring medical treatment and/or medication?

**YES**       **NO**       If yes, please detail below (medication, dose, frequency).

Does your child have any allergies?

**YES**       **NO**       If yes please give details.

Does your child have any specific dietary requirements?

**YES**       **NO**       If yes please give details.

What additional needs, if any, does your child have e.g. needs help to administer planned medication, assistance with lifting or access, regular snacks?

The Equality Act 2010 defines a disabled person as 'anyone with a physical or mental impairment, which has a substantial and long-term adverse effect on his or her ability to carry out normal day to day activities'.

Do you consider your child to have a disability?

**YES**

**NO**

If yes what is the nature of the disability?

Does your child have any communication needs e.g. non-English speaker/ hearing impairment/ sign language user/ dyslexia?

**YES**

**NO**

If yes, please tell us what we need to do to enable them to communicate with us fully.

I confirm to the best of my knowledge that my child does not suffer from any medical condition other than those detailed above.

I agree to notify England Golf Championship Department of any changes.

I, ....., being parent/guardian of the above named child, hereby give permission for the England Golf responsible person to give the immediate necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my child's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

## **SAFEGUARDING JUNIOR ENTRANTS**

(For full details, please refer to England Golfs Safeguarding Children and Young People Policy and Procedure.)

- Everyone working with children and young people has a responsibility for keeping them safe, irrespective of their role, whether they are paid members of staff or volunteers.
  
- Parents may be encouraged to stay for competitions & other events where their children are of an age where greater levels of parental supervision is required.
  
- Parents should be made aware that with limited changing room space there may be occasions when adults and children may need to share the facilities.
  
- Parents should be aware that if children are left at a venue unsupervised, other than to attend specific coaching sessions, England Golf cannot accept supervisory responsibility.
  
- In this instance a child is determined by law as anyone under the age of 18 years of age.

**The signature below denotes that I accept the safeguarding conditions outlined above and that my child has my permission to be on the golf club's premises.**

<b>Signed – Parent/Guardian</b>	
<b>Print Name</b>	
<b>Date</b>	
<b>Championship</b>	

**Parental Form must be completed and returned on or prior to the  
Registration Day for the Championship**

Email	<a href="mailto:championships@englandgolf.org">championships@englandgolf.org</a>
Post	England Golf, Championship Dept, The National Golf Centre, The Broadway, Woodhall Spa, Lincs, LN10 6PU
In person	Handed to the Registration Desk at the Championship