STOURBRIDGE CYCLING CLUB

PARENTAL CONSENT FORM

Riders Full Name		Date of Birth						
To be completed	by Parent or Guardian			•				
Name								
Address								
Postcode	<u> </u>	Telephone						
MEDICAL COND	DITIONS	,						
(eg asthma, diak any form of phys giving your perm	y important medical information betes, epilepsy). If you have an sical activity then please consult ission for you child to participate keep the club informed of any sion:	y concerns about t your Doctor/Ger e in Club activitie	t your child neral Practes. Parent nild's med	d participate titioner prices and Guatical condite	ting in or to ardians ion.			
EMERGENCY CONTACT DETAILS Please indicate the person or persons who should be contacted in case of an incident/accident:								
Name:		Relationshi to child	ip					
Telephone:		Mobile:						
Name		Relationshi to child	ip					
Telephone:		Mobile:						

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CODE OF CONDUCT FOR RIDERS AND PARENTS OR GUARDIANS

Stourbridge Cycling Club operates the policy of the British Cycling Code of Conduct to ensure reasonable steps are taken to establish a safe environment where a young rider can enjoy developing their cycling skills. The majority of coaching sessions will take place away from public highways. However, some riders may be involved in training sessions that take place on a public highway. Young riders will only be invited to take part in such sessions when Club Coaches feel they are sufficiently responsible for their own actions and have developed the necessary bike handling skills and levels of fitness in order to cope with riding on a public highway. If you do not wish your child to be involved in such sessions then please tick this box:

I do not wish my child to be involved in sessions that use a public highway.	
The first morning arms to be inverted in eccentric that use a public migrinary.	

Parents or Guardians are quite welcome to stay and watch any coaching session but this is not compulsory. Young riders are expected to remain in the coaching session from arrival to the end unless they have to leave early. If the rider has to leave early, or is being collected by someone other than the Parent or Guardian, the Parent or Guardian must advise the Coach of the details of the arrangement including who will be collecting the rider. It is the Parent's or Guardian's responsibility to ensure that their child's bicycle is in a safe condition to ride. A cycling helmet manufactured to a recognised standard is compulsory at all times during any coaching, training or competitive sessions.

Any young riders who persistently misbehave, or put other riders in danger, or endeavour to spoil the enjoyment of other riders, will be asked to leave the coaching session and may not be allowed to attend future events.

This form must be completed by the Parent or Guardian of all riders under the age of 18 when they first commence coaching sessions with the Club's Coaches. Thereafter a new form must be completed on an annual basis or when any change in circumstance occurs.

CLUB WEBSITE AND PHOTOGRAPHY

All participants are encouraged to visit the Club website for up to date information, results and to visit the various Forum pages (www.stourbridgecyclingclub.com). From time to time photographs of our riders are placed on our Galleries section. If you do not wish your child's photograph to be used for this or any other purpose, please tick this box:

I do not wish photographs of my child to be used for any purpose.	
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DATA PROTECTION

Information given on this form, particularly in relation to any medical condition or illness is recorded and maintained solely for the use of Club's Coaches and Officials to monitor the well being of all children taking part in Club or Club related activities. Information is processed and kept on record under the regulations of the Data Protection Act and will not be disclosed, disseminated or copied to any third parties for any purpose.

Being the Parent or Guardian of the above rider, I understand and agree that my son/daughter participates in coaching, training and competitive events promoted by the Club entirely at his/her own risk. I have considered and understand the nature of such coaching, training and competitive events and have discussed them with my son/daughter. I am satisfied that my son/daughter is sufficiently responsible and competent to assume full and entire responsibility for his/her own safety whilst engaged in coaching sessions, training and competitive events organised by the Club. I agree that my son/daughter shall participate in coaching, training and competitive events without any liability whatsoever on the part of the Club, its Coaches, Elected Officials, Members or Guests in respect of any injury, loss or damage suffered by him/her, provided that this does not exclude the liability of any such party arising from that party's negligence. I confirm that my son/daughter does not have any disability or medical condition, physical or mental, which could affect his/her ability to ride safely as a cyclist. I understand that I must notify the Club at once if at anytime my son/daughter becomes subject to a disability or medical condition, physical or mental, which could affect his/her ability to ride as a cyclist.

Signed (Parent or Guardian)	Date		
Signed (Witness)*	Date		

^{*} This form must be witnessed by an elected Club Official or qualified Club Coach.