



COGENHOE UNITED F.C

Informed Consent for Participation in Football Coaching

Parent/Carers name:

Child's name:

Date:

1. Purpose and Explanation of Procedure

I hereby consent for my child to voluntarily engage in an acceptable plan of football training. I also give consent for him/her to be placed in football training program activities which are recommended to me for improvement of his/her football skills. The levels of training he/she performs will be based upon his/her physical fitness.

My child will be given exact personal instructions regarding the amount and kind of training s/he should do. A professionally trained coach will provide leadership to direct his/her activities, monitor his/her performance, and otherwise evaluate his/her effort. If s/he is taking prescribed medications, I have already informed the coach and further agree to inform them promptly of any changes which my doctor or I have made with regard to use of these.

I have been informed that during my child's participation in the above described training, s/he will be asked to complete the activities unless symptoms such as fatigue, shortness of breath, chest discomfort or similar occurrences appear. At this point, I have been advised that it is my complete right to stop the training and that it is my obligation to inform the coach of my child's symptoms, should any develop.

I understand that during training, a coach will periodically monitor my child's performance. I also understand that the coach may reduce or stop my child's training should any monitoring indicate that this should be done for his/her safety and benefit. Should the need arise due to injury or illness during the session I will transport my child to receive medical treatment.

I understand social distancing guidelines will be adhered to at all times and that the sharing of any equipment will be limited as much as possible.

2. Risks

It is my understanding and I have been informed that there exists the remote possibility during exercise of adverse changes including, but not limited to, abnormal blood pressure, fainting, dizziness, disorders of heart rhythm, and in very rare instances heart attack, stroke, other injury or even death. I further understand and I have been informed that there exists the risk of bodily injury including, but not limited to, injuries to the muscles, ligaments, tendons, and joints of the body. Every effort, I have been told, will be made to minimize these occurrences by assessments during training and by my own knowledge of my child's behaviours. I fully understand the risks associated with exercise, including the risk of bodily injury, heart attack, stroke, other injury or even death, but knowing these risks, it is my desire to for my child to participate as herein indicated.

3. Filming and the benefits of filming

I ~~consent/do not consent~~ (delete as appropriate) for my child to be filmed or photographed to be shared with only Cogenhoe United Football Club coaching staff for use in football education with players affiliated to their

Cogenhoe United Youth Teams. I recognize that involvement in the training sessions will allow my child to learn proper ways to perform the taught skills. These experiences should also benefit other Cogenhoe United Football Club Youth players by indicating how these skills may affect their ability to perform.

4. Parent/Carers Questions and Coach's Responses

Please record any client questions, with the Coach's responses, in the box below. If you have no questions please write "No questions" in the box below.

6. Confidentiality and Use of Information

I have been informed that the information which is obtained in this coaching program will be treated as privileged and confidential and will consequently not be released or revealed to any person (other than for the use of filming stated above), to the use of any information which is not personally identifiable with me for research and statistical purposes so long as the same does not identify my child or provide facts which could lead to my child's identification.

Any other information obtained, however, will be used only by the coach to evaluate my child's needs.

7. Inquiries and Freedom of Consent

I have been given an opportunity to ask questions as to the procedures.

I have read this Informed Consent form, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily, without inducement.

Parent/Carers Name (Printed):

Child's Name (Printed):

Parent/Carers Signature:

Date:

Coach's Signature:

Date: