



# ENGLAND NATIONAL TEAM PROGRAMME 2017/18

## Parental Consent for Unaccompanied Players

**Please note No Member of the ENTP Staff will be responsible for any items of hockey kit or other personal belongings of any player without exception.**

To: ..... (Team Manager')

I hereby give permission for: ..... (Name of child)

Date of birth: .....

Address: .....  
.....

To attend the: .....

On (Date): .....

Name, address and telephone number of Players GP (Doctor):

.....  
.....  
.....

During the event I can be contacted in an emergency at: .....

Home Telephone number: ..... Mobile number.....

I confirm that I have completed and signed the personal and Medical History form required by the ENTP General Manager for my child's participation at the above event and this Consent form should be attached thereto.

If it becomes necessary for my child to receive medical treatment and I cannot be contacted by telephone or any other means to authorise this, I hereby give my consent to any necessary medical treatment and authorise the Team Manager to sign any document required by the hospital authorities.

Signature of parent/guardian: .....

Print Name: .....

Date: .....

Note: The medical profession takes the view that the parent's consent to medical treatment cannot be delegated. This view is explicit in the Children Act 1989. Thus medical consent forms have no legal status and a doctor/nurse insisting on the consent of a parent to a particular treatment has the right to do so. However, it can be a comfort to medical staff to have general consent in advance from parents or to have a Leader on hand able to sign forms required by medical authorities.