Parental consent form



please complete any boxes if information different from Health Questionnaire overleaf

Parent/Guardia Given Nam					•	Guardian Surname		
I, being the above named parent/guardian, understand and agree that my child participates in coaching sessions under instructions given by British Cycling & TVT coaches, entirely at their own risk. I have considered the nature of such sessions and have discussed them with my child. I am satisfied that my child is sufficiently responsible and competent to assume full and entire responsibility for their safety. I agree for First Aid to be administered to my child if deemed necessary by qualified NCC staff.								
Parent/Guardian S					Date			
Child's Given name			Child's Surna	ame			Child's DOB	
Address	1							
Address	2							
Address	3							
Count	У					Postcode		
Home Phone N	О	Emergen			rgency Ph	hone Number		
Mobile phone N	О		·			Gender	Girl 🗌	Воу
Family e mail addres	is s							
 Notes It is part of British Cycling's Code of Conduct and code of ethics to ensure reasonable steps are taken to establish a safe environment where children can develop their cycling skills. Children are expected to remain in the session from start to finish, unless the coach(es) have been informed that the child will be leaving early, and a parent/guardian must remain present for the session. Any children who misbehave, or do not follow the coaches' instructions will be asked to leave the session, and will not be allowed to attend future sessions. An approved helmet must be worn at all times whilst on the track, these can be provided on loan from Velodrome reception. Please make a note of any medical conditions you feel we need to know about below This needs to be completed for all participants under 16 year olds. 								
Medical conditions (
The Velodrome Trust The National Cycling Centre, Stuart Street, Manchester, M11 4DQ Tel 0161 223 2244 (option 3) Fax 0161 231 0592								