



Norfolk Ladies' County Golf Association  
1912

## Player Profile and Parental Consent Forms 2021

The safety and welfare of juniors in our care is paramount. It is, therefore, important that we are aware of any illness, medical condition and other relevant health details so that their best interests are addressed.

**Please complete, sign and return this form to:** Sherrell Chuter 47 Willowcroft Way, Cringleford, Norwich NR4 7JJ or email to [chuter.shez@yahoo.co.uk](mailto:chuter.shez@yahoo.co.uk) It is the responsibility of the junior and their parent to notify the County Junior Organiser (Sherrell Chuter) if any of the following details change at any time during 2021.

<b>Junior Name</b>		
Date of Birth	Home No.	Mobile No.
Address		
<b>Parents' / Carer Names</b>		
Address		(If different)
Home No.	Mobile No.	Work No.
Email address		
<b>Emergency Contacts</b>		
<b>Contact 1 Name</b>		
Relationship to child		
Home No.	Mobile No.	Work No.
Email address		
<b>Contact 2 Name</b>		
Relationship to child		
Home No.	Mobile No.	Work No.
Email address		

<b>Medical Information</b>		
Child's Doctor's name		Tel No.
Doctor's Surgery Address		

Does your child experience any conditions requiring medical treatment and/or medication? **YES**  **NO**

\*If yes please give details, including medication, dose and 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?

**Disability**

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 him/her them to communicate with us fully.

## Code of Conduct for Young Golfers

As a young golfer taking part in a Norfolk Ladies' County Golf Association activity, you should:

- Help create and maintain an environment free of fear and harassment
- Demonstrate fair play and apply golf's standards both on and off the course
- Understand that you have the right to be treated as an individual
- Respect the advice that you receive
- Treat others as you would wish to be treated yourself
- Respect other people and their differences
- Look out for yourself and for the welfare of others
- Speak out (to your parents or a county representative) if you consider that you or others have been poorly treated
- Be organised and on time
- Tell someone in authority if you are leaving the venue
- Accept that these guidelines are in place for the well-being of all concerned
- Treat organisers and coaches with respect
- Observe instructions or restrictions requested by the adults looking after you

You should not take part in any irresponsible, abusive, inappropriate or illegal behaviour which includes:

- Smoking
- Using foul language
- Publicly using critical or disrespectful descriptions of others either in person or through text, email or social network sites
- Consuming alcohol, illegal performance-enhancing drugs or stimulants

## Consent from Parent/Legal Carer:

- 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 NLCGA of any changes to this information.
- I agree that both myself and my child has read and understood the NLCGA code of conduct.
- I give my consent that in an emergency situation, NLCGA may act in my place (loco parentis), if the need arises for the administration of emergency first aid and/or other medical treatment which, in the opinion of a qualified medical practitioner, may be necessary. I also understand that in such an occurrence all reasonable steps will be taken to contact me or the alternative adult named in this form.
- I acknowledge that NLCGA is not responsible for providing adult supervision for my child, except for formal junior golfing coaching, matches or competition.
- I agree to my child being transported by County representatives to and from venues when she is representing the County and at County activities.
- I am happy to received news about Junior activities from the NLCGA.
- I agree to photography or videoing of my child under the stated rules and conditions (find Photography policy at [norfolkladiesgolf.co.uk](http://norfolkladiesgolf.co.uk)) to celebrate success and to promote Norfolk junior girls' golf. **Please tick >**

By signing this document I confirm that I have legal responsibility for

..... ; I am entitled to give this consent and I am aware of how the information I have provided may be used.

**Signed – Parent/Carer**

**Print name**

**Date**

In compliance with the Data Protection Act 2018, GDPR and all relevant data protection legislation, all efforts will be made to ensure that information is accurate, kept up to date and secure and that it is used only in connection with the purpose and activities of the organisation. Information will not be kept once a person is no longer **involved with NLCGA**. The information will be disclosed only to those members of the organisation for whom it is appropriate and relevant officers of England Golf where necessary.