



## Australian Youth Week Parental Consent Form

This form must be completed by a Parent or legal guardian of any player participating in Youth Week 2023 born on or after 07/01/2005.

All players aged 17 or younger must be accompanied by a parent or guardian at the Championships who is responsible for the child at all times.

Name of player \_\_\_\_\_

Player DOB \_\_\_\_\_

Player contact number \_\_\_\_\_

Allergies or medical information \_\_\_\_\_

\_\_\_\_\_

**\*PLEASE ATTACH ANY OTHER DOCUMENTS EG. ANAPHYLAXIS MANAGEMENT PLAN**

Name of Parent(s) or legal guardian(s) \_\_\_\_\_

\_\_\_\_\_

Contact phone number(s) of parent or legal guardian(s) \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Name of Parent or Guardian who will be responsible for the player at Youth Week

\_\_\_\_\_

Contact number(s) for Parent or Guardian who will be responsible for the player at Youth Week

\_\_\_\_\_

Email: \_\_\_\_\_

Other emergency contact details that you may like to provide

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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### Parent/Guardian Consent

I/we \_\_\_\_\_

Consent to the following for my/our child/junior dependant named

\_\_\_\_\_

a) attending the 2023 Australian Youth Week, Canberra, Australia.

b) accept that neither the ABF or the tournament officials are responsible for the care of the above-named player during the event.

c) will be attending the event with the player or have arranged for a guardian to be responsible for the player during the event.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Relationship to the minor \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_