



## **CONSENT / MEDICAL AUTHORISATION FORM**



This form should be completed by parents / guardians and given to the travelling coach 7 days prior to the trip.

### **PERSONAL DETAILS** (Please PRINT clearly):

Players Name: .....

Address: .....

.....

.....

Post Code: .....

Date of Birth: .....

Parents Name(s): .....

HOME Telephone Number: .....

WORK Telephone Number: .....

MOBILE Telephone Number: .....

Email Address: .....

### **MEDICAL INFORMATION**

Please list below any relevant medical information the travelling coach should be made aware of:

<p>Any conditions requiring medical treatment, inc. medication?</p> <p>Please circle: YES / NO</p> <p>Initial:</p>	<p>Please give details</p>
<p>Does your son / daughter have any allergies i.e. medication, food, insect bites etc?</p> <p>Please circle: YES / NO</p> <p>Initial:</p>	<p>Please give details</p>
<p>Please give details of the type of pain relief medication your child may be given if necessary:</p>	
<p>Please state any special dietary needs:</p>	

## **PAYMENT**

I agree to pay the required trip fees and proportion of the coach's expenses by the dates specified in the Terms and Conditions. I agree that if for any reason my son / daughter withdraws from the trip after payments have been made there can be no refund of any fees.

## **PHOTOGRAPH / VIDEO IMAGES**

I agree that any photos or videos taken of my son / daughter may be used by International Travelling Coach and may appear on [www.itc-tennis.com](http://www.itc-tennis.com) and / or associated social media platforms for promotion / advertising.

## **DECLARATION**

I agree to my son / daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.

I will inform the travelling coach as soon as possible of any medical changes or other changes in circumstances between now and the commencement of the trip.

I confirm that I have read the Terms and Conditions of International Travelling Coach (available at [www.itc-tennis.com](http://www.itc-tennis.com)) and I consent to my son / daughter taking part in the trip. I acknowledge that the travelling coach will be acting "IN LOCO PARENTIS" for the duration of the trip unless I, or another designated parent / guardian, are accompanying my son / daughter on the trip.

### **To be completed by the parent / guardian:**

I, ..... (parent / guardian)  
being the parent or guardian of the above named child agree that I have read and understood all of the Terms and Conditions and consent for my son / daughter to participate in the trip

to ..... (state country)

on ..... (start date of the trip)

**Signed:** ..... **Date:** .....

### **To be completed by the player:**

I, ..... (player's name)  
confirm that I have read, understood and agree to all of the Terms and Conditions of the trip.

**Signed:** ..... **Date:** .....