**PARENTAL CONSENT FORM**

Notes for Parents & Guardians

**CLUB RUNS**

All participants under the age of 18 must have a signed Bath CC parental consent form. The minimum age for unaccompanied children on clubruns is 16. There is no lower age limit if accompanied by a responsible adult acting in loco parentis, but a signed parental consent form is still needed.

Children aged 16 to 18 may participate unaccompanied if they have parental permission and the parental consent form is signed.

Parents or guardians must be aware:

- of the demands of Club Runs and that they alone make the decision about the ability of their child to complete the ride.

- that the child may cycle or be in the company of other adults and/or with children, but that there is also a possibility of the child cycling or being on their own.

- that while Bath CC extends a welcome to cyclists of all ages and abilities, no special provision for children is provided on the clubrun.

Arrangements to get to and from the ride and club room are the sole responsibility of the parent or guardian.  Clubrun riders must carry identification, emergency contact details and details of any medical or health conditions together with information about any medication that they are taking. Bath CC, its members, agents and other participants may take photographs during the rides, mostly for private use but some may be for local or national publicity purposes. It may be difficult to ensure that photographs in which your child appears will not be used in any way.  If you have concerns about this please speak to the leader/organiser.

**RACING**

Competitors over 16 years of age are permitted to compete on the public highway and must therefore assume full and entire responsibility for their own safety in relation to other traffic. Parents must understand and have emphasised to their son/daughter that the function of marshals in such events is to do no more than indicate the direction the rider should take and that the responsibility for safety whilst negotiating corners, turns and other hazards must rest with the rider alone.

Parents must understand further and have impressed upon their son/daughter that all competitors in events on the open road must observe the law of the land relating to road travel.

 Parents must agree that their son/daughter shall participate in such events without any liability whatsoever on the part of the promoter, promoting club, or any club or organisations affiliated thereto or their officials or members in respect of any injury, loss or damage suffered by him/her, however caused.

**COMMUNICATION**

Parents must understand that run leaders, coaches, organisers and team managers may need to communicate directly with children who are over 15.  This communication may be via text message, email, whatsapp or social media (facebook etc).  This communication will be limited to arrangements for club runs or races and positive feedback.  This communication will normally be by group chat, but occasionally will be direct message when this is appropriate.

**GENERAL**

I confirm that my son/daughter does not have any disability or medical condition, physical or mental, which could affect his/her ability to ride safely as a club cyclist. I understand that I must notify the Club Secretary at once if at any time my son/daughter becomes subject to a disability or medical condition, physical or mental, which could affect his/her ability to ride safely as a club cyclist.

I consent for the child named opposite to participate in CLUBRUNS / RACING and that coaches, rune leaders, managers may COMMUNICATE directly with your child (delete as appropriate). I have read and understood the Notes above.

Signature of parent or guardian:  ...........................................................


Name (in BLOCK CAPITALS):  ................................................................


First name:  ...................................... Surname:  ..............................................


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

 ............................................................... Postcode:  ...........................

Date of birth  …………………………


Emergency contact details:

Name:  .................................................. Telephone:  ...........................................


Relationship to rider:  ........................................................................................


Please give details of any medical or health conditions that might affect your participation in cycling, and any medication that you are taking.