

SAFEGUARDING AND CHILD PROTECTION

Dear Parent / Guardian,

Emergency First Aid / Medical treatment. **Please complete this form after completing the entry form overleaf**

Should your child suffer an injury or become ill whilst playing golf it may not always be possible to contact you. Should you not be available to give your consent at the time and wish the East Berkshire Golf Club Limited to provide First Aid, or seek emergency treatment, please complete the authorisation below and return it to the East Berkshire Golf Club Secretary along with the Junior Stag Entry Form.

Parent / Guardian Authorisation:

Name of Child or Young Person

Date of Birth NHS Number

Doctors Name Telephone No:

Doctors Address:

* My child is under 16 years of age and I authorise the East Berkshire Golf Club Limited to arrange for my child to receive essential medical treatment from a qualified medical practitioner at a hospital, or other medical centre, if necessary.

* My child is 16 years of age or over and I acknowledge that he / she has the right to decide for himself / herself on the treatment to be received or the need to attend a hospital or medical centre.

In the event of any medical attention being administered, I understand that the East Berkshire Golf Club Limited will inform me of the action/s taken.

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

If YES then please give details, including medication, dose and frequency:-

Does your child have any allergies? **YES / NO**

If YES then please give details:

Does your child have any special dietary requirements? **YES / NO**

If YES then 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? Please give details:- _____ Please now record

any medications which are **NOT to be administered:-**

I confirm that to the best of my knowledge my child does not suffer from any medical condition other than those detailed above.

I, being the parent / guardian of the above named child, hereby give permission for Club responsible person to give the immediate necessary authority on my behalf, for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my child's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

Signed (Parent / Guardian):- Date:- Print Name:-

Tel No (Home) Work:- Mobile:-

*** Delete as necessary.**

USE OF PHOTOGRAPHIC EQUIPMENT AT EAST BERKSHIRE GOLF CLUB LIMITED

It is not the intention of East Berkshire Golf Club Limited to prohibit those with legitimate interest in filming or photographing children or young people's participation in sport, however, the East Berkshire Golf Club Limited has a policy and a procedure in place regarding the use of cameras and photographic images at events they organise.

The Policy is:

- To ensure children / young people, Parents / Carers and the East Berkshire Golf Club Limited have control over the images of children / young people.
- To deter unsuitable people from misusing sporting activities to obtain images of children.
- To prevent unsuitable images of children or inappropriate representations of the sport being produced.
- To protect the identity of children and young people who may be made vulnerable through the publication of any image.

The Procedure is:

- East Berkshire Golf Club Limited asks that any person wishing to use photography / video equipment should register their details in the Secretary's Office before carrying out any such photography on the golf course, the Clubhouse or surrounding area. (The practice area and the putting green are classed as on the golf course).
- East Berkshire Golf Club Limited reserves the right of entry to any of its events and reserves the right to decline entry to any person unable or unwilling to meet or abide by these conditions.
- East Berkshire Golf Club Limited also wishes it to be known that they also reserve the right to call on the police should they have any doubts as to the authenticity of any individual.

Once registered, an identification label will be issued to identify those who have registered.

Anyone found using photographic / video equipment and NOT wearing / showing the identification will be questioned.

If competitors / Parents have any concerns they should raise these concerns by contacting the Secretary's Office.

Please help us safeguard your children

I consent to him / her participating in events and activities organised by East Berkshire Golf Club Limited.

Signature of Parent / Guardian / Responsible person:-

Date.....

PLEASE NOTE:- THIS FORM MUST BE COMPLETED. FAILURE TO DO SO WILL RESULT IN NON ACCEPTANCE OF ENTRY INTO THE COMPETITION.