

Ealing Hockey Club Junior Player Consent for Adult Fixtures

Player Details	
Player Name:	
Age Group (e.g., U16):	

1. Acknowledgment of Policy and Risk

I, the undersigned parent/guardian, confirm that I have been fully informed of the **Ealing Hockey Club's policy** regarding the selection of junior players in adult matches.

- I understand that playing with physically stronger and more experienced players in an adult league presents **associated risks and benefits** that differ from junior hockey.
- I acknowledge that a **risk assessment** has been conducted to evaluate the safety of the environment and the standard of the league for my child's participation.

2. Communication and Monitoring

- I agree that my child's participation is subject to a **joint agreement and ongoing monitoring** by the **Lead Coach** and the **Club Welfare Officer**.
- I understand that the Lead Coach is responsible for **consistent monitoring and communication** to ensure my child is coping well, both physically and emotionally, with the demands of the adult team environment.

3. Level of Participation and Priority of Fixtures

- I agree that the **Lead Coach, Welfare Officer, and I** will discuss and agree upon the **appropriate level of play** for my child before they are selected for adult fixtures.
- **Crucially, selection for adult fixtures is dependent on the player maintaining consistent attendance and fulfilling their commitments to their junior team fixtures. Junior fixtures take priority** over adult selections.

4. Mandatory Availability Confirmation (Teamo App)

- I understand and agree that my child's selection for any adult match is dependent on the club receiving **early confirmation of their availability**.
 - I am aware that I must submit my child's availability via the **Teamo app 10 to 14 days in advance** of the match date. Failure to provide timely confirmation may result in my child not being selected.
-

Ealing Hockey Club Junior Player Consent for Adult Fixtures

Parent/Guardian Consent

By signing below, I grant my written consent for my child to be permitted to play in Ealing Hockey Club adult matches, subject to the conditions outlined above, **including the priority of junior fixture attendance**, and the ongoing assessment of the Lead Coach and Welfare Officer.

Parent/Guardian Name (Printed):	
Parent/Guardian Signature:	
Date:	

Club Agreement (For Official Records)

Lead Coach Name (Printed):	
Welfare Officer Name (Printed):	
Joint Agreement to Play Confirmed:	YES / NO (Circle one)
Date of Agreement:	