

## LRTA Parental and Under 18 year old Consent form

I,.....parent/guardian\* of .....('the Under18')  
have read the application form completed by her and consent to her joining the Ladies Real Tennis Association ('LRTA')  
on those terms. I confirm that I will ensure that when she is participating in any tournament, match, coaching or other  
event organised by the LRTA ('an LRTA event') she will always be accompanied by me or a designated adult ('the  
Supervising Adult') and that I/the Supervising Adult and the Under 18 will comply with any Child Protection and /or  
Health & Safety rules/regulations the Court/venue may have.

In addition I confirm that when the Under 18 is participating in an LRTA event I/the Supervising Adult will:-

- (a) be responsible for holding and providing as appropriate any medicines or medical information for the Under 18;
- (b) be responsible for ensuring that the Under 18 complies with any dietary requirements she may have; and
- (c) ensure that the Under 18 only uses the changing facilities if they are not in use by others (apart from members of her family);

I consent to the Under 18 being involved in any publicity (including photography/television coverage/social media etc.)  
surrounding the match/tournament/event (This may include reports and photos appearing in Newsletters and/or on  
web sites).

I, the aforementioned Under 18, agree to being involved (including photography/television coverage/social media  
etc.) in such publicity

Signature of Under18: .....

Please print name of U18: .....

The contact details of the consenting adult are:

Address.....

Contact tel. number(s).....Mobile.....

E-mail.....

I, the consenting adult understand and agree that my details will be held by the LRTA in accordance with its Privacy  
Policy, which is on the LRTA website at <http://www.lrta.org.uk/privacy-notice.html>

I agree that the LRTA or those running events on its behalf may contact me by: email /phone /post \*

As you are the consenting adult we do need to be able to contact you by at least one of email or telephone/mobile  
phone and preferably both.

Signature of consenting adult .....Date.....

Please print name of consenting adult .....

Please return this form with the application form by email to [viv.dawes@lrta.org.uk](mailto:viv.dawes@lrta.org.uk) or by post to LRTA Membership  
Secretary, c/o Seacourt Tennis Club, Victoria Avenue, Hayling Island, PO11 9AJ.