



Competing Clubs Tournament Pack

TOURNAMENT CONTACT DETAILS

Contact	Name	Phone Number	Email Address
Tournament Secretary			
First Aid			
Tournament Designated Safeguarding Officer			
Northamptonshire FA Designated Safeguarding Officer	Raffi Coverdale	07535 640452	Safeguarding@NorthantsFA.com
NSPCC	Helpline	08008005000	
MASH (Multi Agency Safeguarding Hub)	Helpline	0300 126 1000	MASH@Northamptonshire.gcsx.gov.uk

Consent Form & Emergency Contact details

To be completed by all competing teams

Team:

Manager Name:

1. ACTIVITIES & VISITS

I hereby agree to my team participating in the Competition
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Do you accept that you have overall responsibility for the team if the situation arises? (please circle answer)	Yes	No
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2. EMERGENCY CONTACT NUMBERS

I may be contacted on the following telephone numbers:			
Name:		Role:	
Work:	Home:	Mobile:	
If I am not available, please contact:			
Name:		Role:	
Work:	Home:	Mobile:	

Manager/Coach DECLARATIONS and CONSENT

- **I acknowledge** the need for obedience and responsible behaviour from all members of the team, and accept that any serious misbehaviour that could put others at risk or could be offensive may result in the team being withdrawn from the competition.
- **I confirm** I have the parents/guardians permission for each player to participate within this tournament if any of my clubs players are under the age of 18- including in adult football.
- **I understand and accept** that there is some level of risk in every activity, but that all reasonable measures will be taken to minimise the risks involved.
- **I understand and accept** that it is my responsibility to ensure that all players in my team arrive and leave together - for any players under the age of 18.—including in adult football.
- **I understand if necessary** to inform the Tournament First aider of any medical concerns
- **I undertake** to inform the Tournament Organisers of any changes in the medical or other circumstances of any member of the team prior to the game.
- **I confirm** I have parent/guardian permission for any medical care to be undertaken by the tournament first aiders if any of my players are under the age of 18- including in adult football.
- **We have a club photography policy** and will update you if there is anyone who does not consent for photos to be taken.

I confirm that my team has adequate personal accident insurance should an injury occur

Signed:	Name:
Date:	Role:

