



Southern Idaho Soccer Association

Parental Consent Form

I confirm that I _____ am the parent/legal guardian of

_____.

I hereby consent to the above child participating in the activities of the Southern Idaho Soccer League in line with the rules, guidance, and code of conduct of the league and the Idaho State Soccer League. I have provided contact details below and undertake to inform the registrar of the league of any changes to this information. I confirm that all details are correct and I am able to give parental consent for my child to participate in all activities in the club.

I confirm that I have read the code of conduct, as well as the rules, guidance, and policies of the league, and I undertake to abide by the obligations which it imposes on me as the parent/legal guardian of the above-named child.

I acknowledge that the club is not responsible for providing adult supervision for my child.

Guardian Name: *(please print)* _____

Guardian Signature _____

Contact Details

Name of Child _____

Address _____

Guardian Mobile Phone No. _____

Emergency Contact No. (1) _____

Emergency Contact No. (2) _____



Please also include all medical details that might be relevant in dealing in with your child in a safe manner, such as allergies, medication, special needs, etc.

Photographic & Video Consent

I consent/do not consent to the below mentioned child being included in any photographic or video material, in any publications/websites/social network applications which may be used for the purpose of documenting and highlighting their involvement with the Southern Idaho Soccer Association.

Player Name: _____

Player Age: _____

Guardian Signature: _____

Date: _____

Guardian Print Name: _____

Relationship to child: _____

Phone No. _____