



**FELIXSTOWE & WALTON UNITED FOOTBALL CLUB**

Written Consent for Football involvement- COVID-19

Felixstowe & Walton Utd F.C. requires parental consent before your child takes part in any football activities.

By signing the below or replying to this e-mail and stating “I consent for my child to take part”, you are confirming that you have read and understood the activities being offered to your child and agree with the measures the club has put in place to manage any risks, including its Covid-19 measures in line with current Government guidance.

A copy of the club’s risk assessment/management documentation (can be found on the Clubs website or a hardcopy can be obtained on request)

If your child has any specific medical conditions, please ensure that you discuss these with the club welfare officer and or coach and agree the best way to support your child’s needs e.g. you staying to watch nearby and taking responsibility to administer the medication.

For your information, the club may use a form to gather any relevant information from you.

“If your child has had Covid-19, or symptoms for more than seven days, you must seek medical approval from your family doctor before they can restart any football activity”.

If you wish to withdraw consent to your child participating in any or all activities, please notify Lynne Hakes (Child Welfare officer, 07977134411) or Tamlyn Ward (Junior Section Chairman, 07787918014) in advance, or as soon as possible.

**“I consent for my Child to take part in Football activities (both training & matches) for and under Felixstowe & Walton Utd F.C.”**

**Name:..... Signed:..... Date:**  
.....

**Parent/Guardian to: .....Age Group : U.....**

**Goldstar Ground, Dellwood Avenue, Felixstowe, IP11 9HT TEL:01394 282627**  
[www.felixstowefootball.co.uk](http://www.felixstowefootball.co.uk)

**Youth Chairman: Tamlyn Ward, 07787918014**  
**Youth Vice Chairman: Scott Dunne, 07790820396**  
**Child Welfare Officer : Lynne Hakes, 07977134411**



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**“I have read and understood the Clubs guidance and safety procedures put in place and as a result I consent for my Child to take part in Football activities (both training & matches) for and under Felixstowe & Walton Utd F.C.”**

Parent/Guardian Name:	Child/players Name:	Parents/Guardians Signature of consent:	Date :