

Walterstown GFC Permission Slip for Juvenile Event

EVENT & DATE :

Date ____/____/20__

Team: _____

Name of Child: _____

How we intend to get to match: _____

Pick up time: _____ **Pick up location:** _____

Drop off time: _____ **Drop off location:** _____

Young Player:

I have read and accept the conditions and rules set down in the Code of Behaviour for GAA players of this club. I agree to abide by the rules of this Club and the Association.

Signed: _____ **Date:** _____

Parent/Guardian of Player:

I have read and accept the conditions and rules set down in the GAA Code of Behaviour.

Signed: _____ **Date:** _____

Emergency Contact Numbers:

Any known allergies or medical conditions:

- The Code of Behaviour for GAA players, coaches and parents is available from the GAA website at <http://www.gaa.ie/news/gaa-code-behaviour/>

Pictures of the day's activities may be taken and may be used on our social media and or website to promote / publicise / or report on the event. These pictures if used will only be used by Walterstown GFC and will not be shared with any other parties.

I agree to allow my child(ren) to appear in photos in relation to this event

Yes

No