



**Leicestershire and Rutland
Ladies' County Golf Association**

**Player Profile, Contact Details,
Medical and Photographic Consent Form**

The safety and welfare of girls in our care is paramount, and it is therefore important that we are aware of any illness, medical condition and other relevant health details in order that their best interests are addressed. Please complete this form with our assurance that the information will be treated as confidential.

It is the responsibility of the junior and their parent/guardian to notify the County Junior Organiser if any of the details change at any time.

Name of Girl			
Date of Birth			
Handicap as of March '20		CDH Number: <i>(very important)</i>	
Home Club			
Home Address			
Email Address			
Telephone Number			
Parents' Names Please indicate which is the preferred contact	Father	Mother	
Address (if different from above)			
Home Telephone No			
Mobile Telephone No			
Work Telephone No			
Email Address:			

Medical Information

Child's Doctor's name	
Doctor's Surgery Address	
Telephone Number	

2. Does your child experience any conditions requiring medical treatment and/or medication?

*Yes ☐ No ☐ If yes please give details, including medication, dose and frequency.

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3. Does your child have any disabilities, allergies, dietary requirements or additional needs?

*Yes ☐ No ☐ *If yes please give details.

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- I agree to notify L&RLCGA should the above details need to be updated/changed and if my daughter should not be participating in an event/activity due to illness or injury.

I,, being parent/guardian of the above named child, hereby give permission for the L&RLCGA responsible person to give the immediately necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my daughter's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

Signed – Parent/Guardian	
Print name	
Date	

PHOTOGRAPHIC CONSENT

We have a website www.lrlcga.co.uk and we also publish newsletters and send news items to local papers. We would like to include photos of girls' golfing activities, but need your permission. Please sign below if you agree.

I give permission for my child/children to be photographed through her involvement in L&R LCGA junior golf and for those photos to be used in the above ways.

Signedparent/guardian. Date.....