## **National Field Archery Society**



## **Shoot Guardian Form**

All children and young people under the age of 18, who are not being accompanied by a parent or guardian, must have a shoot guardian and a completed copy of this form. A shoot guardian may only take responsibility for one child.

This form will be valid for a 12-month period or until any of the information changes, after which a new form must be completed.

The child's shoot guardian needs to know these details to meet the specific needs of your child

I give permission for my child to attend: (delete as appropriate)

## **Open Shoot** Club Shoot

Name of child:									
Address:									
Home telephone number:				Male:		Female:			
Date of birth:				Age:					
			<u> </u>						
Name of shoot guardian:									
Name of parent/guardian									
Emergency telephone number of parent/guardian 1		1				2			
IF UNAVAILABLE CONTACT:		Γ:							
Telephone no:	1		Relationship to child:						
Name of GP:				Telephone number of					
Childs Medical Number:									
Details of any kno	own a	allergies,	prescri	ption medic	ine or me	dica	l conditi	ions:	
Any other specia	l nee	ds. requi	irement	ts or directic	ons that wo	ould	be help	oful for t	he
coaches and/or s					THO CHICK TO	Juiu	50 Holp	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

I will inform the shoot guardian and complete a new form if there are:

Any changes to my child's health, medication or needs.

Any changes to our address or phone numbers given.

In the event of illness, having parental responsibility for the above named child, I give permission for medical treatment to be administered where considered necessary by a nominated First Aider, or by suitably qualified medical practitioners. If I cannot be contacted and my child should require emergency hospital treatment, I authorise a qualified medical practitioner to provide emergency treatment or medication.

I have been made aware that the NFAS have developed a Child Protection Policy and they are committed to ensuring the safety of my child by having a designated person for child protection, guidelines on confidentiality, disciplinary procedures, and clear reporting procedures.

The NFAS is committed to ensuring that any information gathered from this form meets the specific responsibilities as set out in the Data Protection Act 2018. I understand that the club/organisation will store the above information securely for a maximum of 5 years, or until the child reaches the age of 18.

I confirm that all details are correct, to the best of my knowledge, and I am able to give parental consent for my child to participate in and travel to Open Shoots and Club Shoots accompanied by the above named Shoot Guardian.

Signature	Parent/Guardian
Print Name	Date

One copy of this completed form must be given to the shoot admin, club official, or NFAS official

A second copy must be carried by your child's shoot guardian

Natural mother always has parental responsibility.

Natural father gains parental responsibility:

- f married to the mother at the time of birth or subsequently marries her
- Through an agreement witnessed by solicitor or a Parental responsibility Order
- After 15 April 2002 if both parents jointly register the baby's birth.