## AYC 2015 Parental Consent Form Instructions for participants under 16 years of age on 9<sup>th</sup> January, 2015.

- All participants in the ABF 2015 bridge week born after 9/1/99 may only stay on-site if accompanied by an adult chaperone, also staying on-site. Those participants staying off-site will be under the responsibility of the ABF during the playing hours but not outside those hours and will not be allowed to leave the premises unless accompanied by an adult chaperone during those playing hours.
- Each player born after 9/1/99 must have the accompanying parental release completed and signed by a parent or guardian in order to participate in the 2015 Australian Youth Bridge Championships.
- A hard copy of the completed form must either be brought to the event by the player, or else sent prior to the event to:

Youth Bridge Week c/o ABF office PO Box 397 Fyshwick ACT 2609 Australia

- If bringing the form to the event rather than sending it earlier by mail, it would be appreciated if a scanned copy could be sent in advance by email to <a href="mailto:youthweek2015@abf.com.au">youthweek2015@abf.com.au</a> or else faxed to (02) 6239 1816 this is as a backup in case the hard copy is forgotten. If you're bringing the only copy with you please make sure you don't forget it!
- In the case that a parent or guardian will be present on-site at the start of the event, there is also the option for them to complete and sign the form then.

Many thanks,

Elainne Leach and David Thompson youthweek2015@abf.com.au ph 0402 081 506 (Elainne) or 0417 526 331 (David) Tournament Organisers

## PARENTAL RELEASE for participants under 16 years of age on 9/1/2015

I, (name, please print)
give my permission for my son/daughter (cross out whichever does not apply) (name, please
print) to participate in the
2015 Australian Bridge Federation Youth Bridge Championships held at Bruce Hall,
Australian National University, 40 Daley Rd., Acton, Canberra 2582, from Saturday 10 <sup>th</sup> to
Friday 16 <sup>th</sup> January 2015.
I understand that it is my responsibility to organize their travel arrangements to and from the
tournament on each day that they are participating, unless they are staying on-site.
I understand that in providing this Parental Release, that
(please fill in first name of your child) will be under the supervision of the tournament
organisers and other officials during the playing times that they are participating, but not
outside those hours.
Attachments:
1. I have supplied contact telephone numbers for myself and for another responsible
adult (see over).
2. If accommodation and supervision arrangements have been made for staying on-site,
I attach signed details of those arrangements to signify my consent, and notify the
organisers of the details of the adult chaperone staying on-site. (Please cross
paragraph 2 out if not applicable.).
3. I attach a list of medication/s that my son/daughter (cross out whichever does not
apply) is required to take during the period of the Championships. (Please cross
paragraph 3 out if not applicable.)
Signed:
Date:

## **Contact Telephone Numbers:**

Parent/Guardian 1 for contact during playing hours:			
	Business Hours:		
	After Hours:		
	Mobile:		
Parent/Guardian 2 or other responsible adult for contact during playing times:			
	Name:		
	Business Hours:		
	After Hours:		
	Mobile:		

## I, (name, please print) give my permission for my son/daughter (cross out whichever does not apply) (name, please print) to stay onsite at Bruce Hall, Australian National University, 40 Daley Rd., Acton, Canberra 2582, from Saturday 10<sup>th</sup> to Friday 16<sup>th</sup> January 2015. The Adult Chaperone staying on site is: (name please print) Adult Chaperone contact details during playing hours: Business Hours: After Hours: Mobile: Signed:

Parental Consent to stay at Bruce Hall and Details of Adult Chaperone

Date: