



Brucehaven Tennis Club

EMERGENCY CONTACT & PHOTOGRAPHY/FILMING CONSENT FORM

EMERGENCY CONTACT DETAILS

Details on this form will be held securely and will only be shared with coaches or others who need this information in order to meet the specific needs of your child.

Name of child:	
Child's date of birth:	
Child's gender:	
Please detail any medical or additional needs such as allergies, medical conditions and any current medication or special dietary requirement.	

Name of Emergency Contact (1)	
Relationship to the child:	
Address:	
Telephone details:	

Name of Emergency Contact (2)	
Relationship to the child:	
Address:	
Telephone details:	

I, being the parent/carer of the above named child, hereby give consent that if an emergency medical situation arises, I give permission for the designated first aider/responsible adult to either administer appropriate first aid or authorise (on my behalf) any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son/daughter's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

YES/NO (Please circle as appropriate)

PHOTOGRAPHY/FILMING CONSENT DETAILS

In accordance with our photography and filming policy we will not permit photographs, video or other images of children (anyone under 18) to be taken without the consent of the child and their parent or carer.

Brucehaven Tennis Club (BTC) will take all steps to ensure these images or video are used solely for the purposes they are intended which are as follows

- within the club/county for display purposes
- within other printed publications
- on the club/county website
- on the club/county social media pages
- only using the first names of children, unless specifically requested below.

If you become aware that these images are being used inappropriately you should inform BTC immediately.

Please be aware that either you or your child will be entitled to withdraw your consent to this use at any time by informing us formally. In such case we will cease making any new marketing materials using the image(s) and take such reasonable steps as we are able to remove online images from public view: however, please note it may not be possible to delete or destroy all images that have been disseminated online (such as via social media) or in hard copy.

By giving consent, I confirm the following:

1. I consent to my child's image being used in marketing media as described.
2. My child is also aware of the intended use and is happy with it.
3. I understand that my child will not be fully named.

I consent to my child's image being used in marketing media as described above.

YES/ NO (Please circle as appropriate)

Signature of consent by Parent/Carer:	
Print Name:	
Date:	