

CPSC CONSENT FOR INDIVIDUAL TRAINING SESSIONS – TRAINING SESSION SPECIFIC



I, _____, as the parent/legal guardian of _____
_____, a minor athlete, hereby authorize and consent for said minor
athlete to receive individual training sessions from _____, an
Adult Participant, as specified below.

I understand the following are the guidelines for Individual Training Sessions:

1. All sessions must follow the One-on-One interactions policy as found in the Minor Athlete Abuse Prevention Policy.
2. A parent/legal guardian can observe the session.

I can withdraw my consent for the individual training sessions at any time.

Location of Training Session	Frequency of Training Session (e.g., weekly, monthly, etc.)	Time Period of Consent (Not to exceed one year)

Parent/Legal Guardian Name Printed: _____

Parent/Legal Guardian Signature: _____

Date: _____